

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00084832	2 Total pages filed: 844
3 COMMITTEE NAME National Democratic Redistricting Committee		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 10/28/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1032 15th St. NW Ste. 247 Washington , DC 20005		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
		Kirsten	
		NICKNAME	LAST SUFFIX
			Collings
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1032 15th Street NW Ste 247 Washington, DC 20005		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1032 15th Street NW Ste 247 Washington, DC 20005		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1032 15th Street NW Ste 247 Washington, DC 20005		
	AREA CODE PHONE NUMBER EXTENSION (202) 788-6888		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)		
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination		
		<input type="checkbox"/> Runoff	
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	07/01/2024		10/26/2024
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 11/05/2024	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME National Democratic Redistricting Committee	13 Filer ID (Ethics Commission Filers) 00084832
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DaSean Jones Supreme Court Justice
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 366,165.88
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,080,985.94
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 2,007.59
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,277,746.89
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 754,535.50
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Kirsten Collings

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 844

12 COMMITTEE NAME National Democratic Redistricting Committee		13 Filer ID (Ethics Commission Filers) 00084832
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Bonnie Lee Goldstein Supreme Court Justice B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

SUBTOTALS - GPAC

17 COMMITTEE NAME National Democratic Redistricting Committee		18 Filer ID (Ethics Commission Filers) 00084832
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,080,985.94
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,277,746.89
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/828 Rpt: 5/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abbott, Thomas A.	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Teaneck, NJ 07666-3304	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abbott, Thomas A.	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Teaneck, NJ 07666-3304	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra	Amount of Contribution (\$) \$36.00
	Contributor address; City; State; Zip Code Durham, NC 27701-1709	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Durham, NC 27701-1709	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Durham, NC 27701-1709	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/828 Rpt: 6/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27701-1709	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra <hr/> Contributor address; City; State; Zip Code Durham, NC 27701-1709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra <hr/> Contributor address; City; State; Zip Code Durham, NC 27701-1709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra <hr/> Contributor address; City; State; Zip Code Durham, NC 27701-1709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra <hr/> Contributor address; City; State; Zip Code Durham, NC 27701-1709	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/828 Rpt: 7/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27701-1709	7 Amount of Contribution (\$) \$18.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aderhold, Robert <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55403-1957	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agarawal, Harish <hr/> Contributor address; City; State; Zip Code Austin, TX 78759-7016	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agarawal, Harish <hr/> Contributor address; City; State; Zip Code Austin, TX 78759-7016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahern, Janet <hr/> Contributor address; City; State; Zip Code Horsham, PA 19044-1138	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/828 Rpt: 8/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahern, Janet <hr/> 6 Contributor address; City; State; Zip Code Horsham, PA 19044-1138	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahern, Janet <hr/> Contributor address; City; State; Zip Code Horsham, PA 19044-1138	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahern, Janet <hr/> Contributor address; City; State; Zip Code Horsham, PA 19044-1138	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahronheim, Robert <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48104-6247	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahronheim, Robert <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48104-6247	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/828 Rpt: 9/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahronheim, Robert <hr/> 6 Contributor address; City; State; Zip Code Ann Arbor, MI 48104-6247	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahronheim, Robert <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48104-6247	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahronheim, Robert <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48104-6247	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahronheim, Robert <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48104-6247	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahronheim, Robert <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48104-6247	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/828 Rpt: 10/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aiyer, Kamesh <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02139-3961	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Kashi Software Architects Inc.
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aiyer, Kamesh <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139-3961	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Kashi Software Architects Inc.
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aiyer, Kamesh <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139-3961	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Kashi Software Architects Inc.
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aiyer, Kamesh <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139-3961	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Kashi Software Architects Inc.
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aiyer, Kamesh <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139-3961	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Kashi Software Architects Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/828 Rpt: 11/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex, Sheela <hr/> 6 Contributor address; City; State; Zip Code Encinitas, CA 92024-4545	7 Amount of Contribution (\$) \$103.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex, Sheela <hr/> Contributor address; City; State; Zip Code Encinitas, CA 92024-4545	Amount of Contribution (\$) \$31.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex, Sheela <hr/> Contributor address; City; State; Zip Code Encinitas, CA 92024-4545	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Ellen <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85745-9466	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Ellen <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85745-9466	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/828 Rpt: 12/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Ellen	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Tucson, AZ 85745-9466		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Ellen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Tucson, AZ 85745-9466		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Ellen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Tucson, AZ 85745-9466		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Ellen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Tucson, AZ 85745-9466		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Ellen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Tucson, AZ 85745-9466		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/828 Rpt: 13/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, John <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248-5249	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5249	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5249	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/828 Rpt: 14/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Michael <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60626-3081	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alpert, Ralph <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95060-2203	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anand, Diane <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90027-1118	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anand, Diane <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90027-1118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anand, Diane <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90027-1118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/828 Rpt: 15/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anand, Diane <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90027-1118	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anand, Diane <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90027-1118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andarmani, Susan <hr/> Contributor address; City; State; Zip Code Campbell, CA 95008-2801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andarmani, Susan <hr/> Contributor address; City; State; Zip Code Campbell, CA 95008-2801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andarmani, Susan <hr/> Contributor address; City; State; Zip Code Campbell, CA 95008-2801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/828 Rpt: 16/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andarmani, Susan	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Campbell, CA 95008-2801		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andarmani, Susan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Campbell, CA 95008-2801		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andarmani, Susan	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Campbell, CA 95008-2801		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andarmani, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Campbell, CA 95008-2801		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/828 Rpt: 17/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/828 Rpt: 18/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/828 Rpt: 19/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/828 Rpt: 20/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/828 Rpt: 21/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bonnie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brooklyn, NY 11217-3404		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrew, Dean	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Saint Paul, MN 55109-4439		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Michael	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Ashburn, VA 20147-2522		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antonio, Juan	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code North Franklin, CT 06254-1202		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/828 Rpt: 22/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antonio, Juan <hr/> 6 Contributor address; City; State; Zip Code North Franklin, CT 06254-1202	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antonio, Juan <hr/> Contributor address; City; State; Zip Code North Franklin, CT 06254-1202	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antonio, Juan <hr/> Contributor address; City; State; Zip Code North Franklin, CT 06254-1202	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antonio, Juan <hr/> Contributor address; City; State; Zip Code North Franklin, CT 06254-1202	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appel, Sarah <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035-5956	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/828 Rpt: 23/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appel, Sarah <hr/> 6 Contributor address; City; State; Zip Code Highland Park, IL 60035-5956	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appel, Sarah <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035-5956	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Rosemary <hr/> Contributor address; City; State; Zip Code Tampa, FL 33609-4631	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Rosemary <hr/> Contributor address; City; State; Zip Code Tampa, FL 33609-4631	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Mitchell <hr/> Contributor address; City; State; Zip Code Austria, DC 20000	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/828 Rpt: 24/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Mitchell <hr/> 6 Contributor address; City; State; Zip Code Austria, DC 20000	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Mitchell <hr/> Contributor address; City; State; Zip Code Austria, DC 20000	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Mitchell <hr/> Contributor address; City; State; Zip Code Austria, DC 20000	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Mitchell <hr/> Contributor address; City; State; Zip Code Austria, DC 20000	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Mitchell <hr/> Contributor address; City; State; Zip Code Austria, DC 20000	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/828 Rpt: 25/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Mitchell <hr/> 6 Contributor address; City; State; Zip Code Austria, DC 20000	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Monte <hr/> Contributor address; City; State; Zip Code Boulder, CO 80302-5101	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Monte <hr/> Contributor address; City; State; Zip Code Boulder, CO 80302-5101	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Monte <hr/> Contributor address; City; State; Zip Code Boulder, CO 80302-5101	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auburn, Steve <hr/> Contributor address; City; State; Zip Code Plymouth, MN 55441-2249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/828 Rpt: 26/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auburn, Steve <hr/> 6 Contributor address; City; State; Zip Code Plymouth, MN 55441-2249	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Audesirk, Teresa <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80477-5416	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Audesirk, Teresa <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80477-5416	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Audesirk, Teresa <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80477-5416	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Audesirk, Teresa <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80477-5416	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/828 Rpt: 27/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auerbach, Bruce <hr/> 6 Contributor address; City; State; Zip Code Temple, NH 03084-4141	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auerbach, Bruce <hr/> Contributor address; City; State; Zip Code Temple, NH 03084-4141	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auerbach, Bruce <hr/> Contributor address; City; State; Zip Code Temple, NH 03084-4141	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auerbach, Bruce <hr/> Contributor address; City; State; Zip Code Temple, NH 03084-4141	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) August, Diane <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20816-1813	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/828 Rpt: 28/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) August, Diane <hr/> 6 Contributor address; City; State; Zip Code Bethesda, MD 20816-1813	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babberney, Cameron <hr/> Contributor address; City; State; Zip Code Austin, TX 78756-2126	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, Frederick <hr/> Contributor address; City; State; Zip Code Forest Hills, NY 11375-5101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, Frederick <hr/> Contributor address; City; State; Zip Code Forest Hills, NY 11375-5101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, Frederick <hr/> Contributor address; City; State; Zip Code Forest Hills, NY 11375-5101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/828 Rpt: 29/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, Frederick <hr/> 6 Contributor address; City; State; Zip Code Forest Hills, NY 11375-5101	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, James <hr/> Contributor address; City; State; Zip Code Saint Charles, IL 60174-4165	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, James <hr/> Contributor address; City; State; Zip Code Saint Charles, IL 60174-4165	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, James <hr/> Contributor address; City; State; Zip Code Saint Charles, IL 60174-4165	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, James <hr/> Contributor address; City; State; Zip Code Saint Charles, IL 60174-4165	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/828 Rpt: 30/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachman, James <hr/> 6 Contributor address; City; State; Zip Code Saint Charles, IL 60174-4165	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bade, Michael <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94116-1345	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bade, Michael <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94116-1345	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bade, Michael <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94116-1345	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bade, Michael <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94116-1345	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/828 Rpt: 31/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baden, Drew <hr/> 6 Contributor address; City; State; Zip Code Bethesda, MD 20817-3525	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baden, Drew <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-3525	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baden, Drew <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-3525	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Badenhoop, M. Suzanne <hr/> Contributor address; City; State; Zip Code Mill Valley, CA 94941-1082	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baehr, Karla <hr/> Contributor address; City; State; Zip Code Newton Highlands, MA 02461-2007	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/828 Rpt: 32/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bair, Alan	7 Amount of Contribution (\$) \$201.00
6 Contributor address; City; State; Zip Code Pasadena, CA 91105-3121		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bair, Alan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pasadena, CA 91105-3121		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Robert	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Berkeley, CA 94707-2714		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Robert	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Berkeley, CA 94707-2714		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Robert	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Berkeley, CA 94707-2714		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/828 Rpt: 33/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Robert	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Berkeley, CA 94707-2714		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balaban, Richard	Amount of Contribution (\$) \$72.00
Contributor address; City; State; Zip Code Bloomington, IN 47401-6062		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balaban, Richard	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code Bloomington, IN 47401-6062		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balaban, Richard	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code Bloomington, IN 47401-6062		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balaban, Richard	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code Bloomington, IN 47401-6062		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/828 Rpt: 34/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balaban, Richard	7 Amount of Contribution (\$) \$18.00
6 Contributor address; City; State; Zip Code Bloomington, IN 47401-6062		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balaban, Richard	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code Bloomington, IN 47401-6062		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldock, Richard	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Allentown, PA 18103-6977		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldock, Richard	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Allentown, PA 18103-6977		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldock, Richard	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Allentown, PA 18103-6977		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/828 Rpt: 35/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldock, Richard <hr/> 6 Contributor address; City; State; Zip Code Allentown, PA 18103-6977	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Gregory <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33139-1025	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Gregory <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33139-1025	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Gregory <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33139-1025	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Gregory <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33139-1025	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/828 Rpt: 36/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balicki, Mary Jane	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Annandale, VA 22003-6138		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balicki, Mary Jane	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Annandale, VA 22003-6138		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balicki, Mary Jane	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Annandale, VA 22003-6138		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balicki, Mary Jane	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Annandale, VA 22003-6138		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balicki, Mary Jane	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Annandale, VA 22003-6138		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/828 Rpt: 37/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balise, David <hr/> 6 Contributor address; City; State; Zip Code Paramus, NJ 07652-3349	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balise, David <hr/> Contributor address; City; State; Zip Code Paramus, NJ 07652-3349	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barash, Daniel <hr/> Contributor address; City; State; Zip Code Worthington, OH 43085-3504	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baratta, Barbara <hr/> Contributor address; City; State; Zip Code Greenwich, CT 06830-6403	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baratta, Barbara <hr/> Contributor address; City; State; Zip Code Greenwich, CT 06830-6403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/828 Rpt: 38/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baratta, Barbara <hr/> 6 Contributor address; City; State; Zip Code Greenwich, CT 06830-6403	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baratta, Barbara <hr/> Contributor address; City; State; Zip Code Greenwich, CT 06830-6403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber III, Edwin L. <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-2042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber III, Edwin L. <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-2042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber III, Edwin L. <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-2042	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/828 Rpt: 39/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bargmann, Karen <hr/> 6 Contributor address; City; State; Zip Code Brentwood, CA 94513-4338	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bargmann, Karen <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-4338	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bargmann, Karen <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-4338	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bargmann, Karen <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-4338	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bargmann, Karen <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-4338	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/828 Rpt: 40/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> 6 Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/828 Rpt: 41/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> 6 Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, James <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-4850	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/828 Rpt: 42/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Marilyn <hr/> 6 Contributor address; City; State; Zip Code Union, CT 06076-4617	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Marilyn <hr/> Contributor address; City; State; Zip Code Union, CT 06076-4617	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Keith <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309-4120	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Keith <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93309-4120	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartels, Joel <hr/> Contributor address; City; State; Zip Code Rowe, NM 87562	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/828 Rpt: 43/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartels, Joel <hr/> 6 Contributor address; City; State; Zip Code Rowe, NM 87562	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barth, Michael <hr/> Contributor address; City; State; Zip Code Boulder, CO 80303-2935	Amount of Contribution (\$) \$52.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barth, Michael <hr/> Contributor address; City; State; Zip Code Boulder, CO 80303-2935	Amount of Contribution (\$) \$52.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barth, Michael <hr/> Contributor address; City; State; Zip Code Boulder, CO 80303-2935	Amount of Contribution (\$) \$52.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartley, Anne <hr/> Contributor address; City; State; Zip Code Indian Wells, CA 92210-7616	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/828 Rpt: 44/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Judith <hr/> 6 Contributor address; City; State; Zip Code Chapel Hill, NC 27516-9060	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Judith <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-9060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Judith <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-9060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Judith <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-9060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Sharon <hr/> Contributor address; City; State; Zip Code Checotah, OK 74426-6504	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/828 Rpt: 45/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Sharon <hr/> 6 Contributor address; City; State; Zip Code Checotah, OK 74426-6504	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Sharon <hr/> Contributor address; City; State; Zip Code Checotah, OK 74426-6504	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battin, Thomas <hr/> Contributor address; City; State; Zip Code Bangor, ME 04401-5845	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battin, Thomas <hr/> Contributor address; City; State; Zip Code Bangor, ME 04401-5845	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battin, Thomas <hr/> Contributor address; City; State; Zip Code Bangor, ME 04401-5845	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/828 Rpt: 46/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baucom, Earl <hr/> 6 Contributor address; City; State; Zip Code Sudbury, MA 01776-2248	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baucom, Earl <hr/> Contributor address; City; State; Zip Code Sudbury, MA 01776-2248	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bays, Philip <hr/> Contributor address; City; State; Zip Code South Bend, IN 46635-2056	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/828 Rpt: 47/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> 6 Contributor address; City; State; Zip Code South Portland, ME 04106-4604	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/828 Rpt: 48/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> 6 Contributor address; City; State; Zip Code South Portland, ME 04106-4604	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Louisa <hr/> Contributor address; City; State; Zip Code South Portland, ME 04106-4604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/828 Rpt: 49/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becque, Bruce	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Ellsworth, ME 04605-2757		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becque, Bruce	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ellsworth, ME 04605-2757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becque, Bruce	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ellsworth, ME 04605-2757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becque, Bruce	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Ellsworth, ME 04605-2757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becque, Bruce	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Ellsworth, ME 04605-2757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/828 Rpt: 50/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becque, Bruce <hr/> 6 Contributor address; City; State; Zip Code Ellsworth, ME 04605-2757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedingfield, Scott <hr/> Contributor address; City; State; Zip Code Kapaau, HI 96755-1220	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedingfield, Scott <hr/> Contributor address; City; State; Zip Code Kapaau, HI 96755-1220	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedingfield, Scott <hr/> Contributor address; City; State; Zip Code Kapaau, HI 96755-1220	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedingfield, Scott <hr/> Contributor address; City; State; Zip Code Kapaau, HI 96755-1220	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/828 Rpt: 51/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedingfield, Scott <hr/> 6 Contributor address; City; State; Zip Code Kapaau, HI 96755-1220	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedingfield, Scott <hr/> Contributor address; City; State; Zip Code Kapaau, HI 96755-1220	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedingfield, Scott <hr/> Contributor address; City; State; Zip Code Kapaau, HI 96755-1220	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedingfield, Scott <hr/> Contributor address; City; State; Zip Code Kapaau, HI 96755-1220	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behm, Georgia <hr/> Contributor address; City; State; Zip Code Loveland, CO 80538-5317	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/828 Rpt: 52/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behm, Georgia	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Loveland, CO 80538-5317		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behm, Georgia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Loveland, CO 80538-5317		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behm, Georgia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Loveland, CO 80538-5317		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behm, Georgia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Loveland, CO 80538-5317		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behnke, Heidi	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Spring Valley, CA 91977-2819		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/828 Rpt: 53/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behnke, Heidi <hr/> 6 Contributor address; City; State; Zip Code Spring Valley, CA 91977-2819	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beitner, Norman <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48323-3322	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beitner, Norman <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48323-3322	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beitner, Norman <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48323-3322	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beitner, Norman <hr/> Contributor address; City; State; Zip Code West Bloomfield, MI 48323-3322	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/828 Rpt: 54/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beitner, Norman <hr/> 6 Contributor address; City; State; Zip Code West Bloomfield, MI 48323-3322	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Amy <hr/> Contributor address; City; State; Zip Code Olympia, WA 98501-1183	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Amy <hr/> Contributor address; City; State; Zip Code Olympia, WA 98501-1183	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Larry <hr/> Contributor address; City; State; Zip Code Taos, NM 87571-7220	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Leonard <hr/> Contributor address; City; State; Zip Code Woodbridge, CT 06525-2533	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/828 Rpt: 55/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellour, Helene <hr/> 6 Contributor address; City; State; Zip Code Oak Park, IL 60302-1554	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellour, Helene <hr/> Contributor address; City; State; Zip Code Oak Park, IL 60302-1554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellour, Helene <hr/> Contributor address; City; State; Zip Code Oak Park, IL 60302-1554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellour, Helene <hr/> Contributor address; City; State; Zip Code Oak Park, IL 60302-1554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellour, Helene <hr/> Contributor address; City; State; Zip Code Oak Park, IL 60302-1554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/828 Rpt: 56/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellows, Aimee W. <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27701-3879	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellows, Aimee W. <hr/> Contributor address; City; State; Zip Code Durham, NC 27701-3879	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Hubbard <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102-3888	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Hubbard <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102-3888	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Hubbard <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102-3888	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/828 Rpt: 57/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Hubbard <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98102-3888	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Hubbard <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102-3888	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benedict, Hubbard <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102-3888	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beran, Richard <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15216-1106	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beran, Richard <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15216-1106	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/828 Rpt: 58/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berdine, Jill <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79490-6804	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berdine, Jill <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79490-6804	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berdine, Jill <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79490-6804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berdine, Jill <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79490-6804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berdine, Jill <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79490-6804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/828 Rpt: 59/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berdine, Jill <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79490-6804	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berdine, Jill <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79490-6804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berdine, Jill <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79490-6804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Paul <hr/> Contributor address; City; State; Zip Code Boulder, CO 80305-7248	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Paul <hr/> Contributor address; City; State; Zip Code Boulder, CO 80305-7248	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/828 Rpt: 60/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berlin, Marlene <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20008-2125	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berman, Paul <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20904-5470	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berman, Paul <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20904-5470	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhart, Barbara M. <hr/> Contributor address; City; State; Zip Code Daly City, CA 94014-3460	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhart, Barbara M. <hr/> Contributor address; City; State; Zip Code Daly City, CA 94014-3460	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/828 Rpt: 61/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhart, Barbara M.	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Daly City, CA 94014-3460	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Best, Elaine	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Santa Fe, NM 87506-2006	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Best, Elaine	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Santa Fe, NM 87506-2006	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettencourt, James	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Oakland, CA 94610-1456	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettencourt, James	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Oakland, CA 94610-1456	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/828 Rpt: 62/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettencourt, James <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94610-1456	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettencourt, James <hr/> Contributor address; City; State; Zip Code Oakland, CA 94610-1456	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birkhimer, Neil S. <hr/> Contributor address; City; State; Zip Code Noblesville, IN 46060-5477	Amount of Contribution (\$) \$201.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birkhimer, Neil S. <hr/> Contributor address; City; State; Zip Code Noblesville, IN 46060-5477	Amount of Contribution (\$) \$200.29
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birkhimer, Neil S. <hr/> Contributor address; City; State; Zip Code Noblesville, IN 46060-5477	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/828 Rpt: 63/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birman, Beatrice <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20901-3301	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birman, Beatrice <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-3301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birman, Beatrice <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-3301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birman, Beatrice <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-3301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blades, Robert <hr/> Contributor address; City; State; Zip Code Hornell, NY 14843-1130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/828 Rpt: 64/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blades, Robert <hr/> 6 Contributor address; City; State; Zip Code Hornell, NY 14843-1130	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blades, Robert <hr/> Contributor address; City; State; Zip Code Hornell, NY 14843-1130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blades, Robert <hr/> Contributor address; City; State; Zip Code Hornell, NY 14843-1130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, D.L. <hr/> Contributor address; City; State; Zip Code New Castle, DE 19720-8001	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, D.L. <hr/> Contributor address; City; State; Zip Code New Castle, DE 19720-8001	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/828 Rpt: 65/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, D.L.	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code New Castle, DE 19720-8001		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, D.L.	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code New Castle, DE 19720-8001		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, D.L.	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code New Castle, DE 19720-8001		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Cathy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New York, NY 10023-4902		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Cathy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New York, NY 10023-4902		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/828 Rpt: 66/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Cathy	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code New York, NY 10023-4902		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Cathy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New York, NY 10023-4902		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Cathy	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code New York, NY 10023-4902		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Cathy	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code New York, NY 10023-4902		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Cathy	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code New York, NY 10023-4902		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/828 Rpt: 67/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blood, Nancy <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19106-3073	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blood, Nancy <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19106-3073	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomberg, Victor <hr/> Contributor address; City; State; Zip Code San Diego, CA 92115-3525	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomberg, Victor <hr/> Contributor address; City; State; Zip Code San Diego, CA 92115-3525	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomberg, Victor <hr/> Contributor address; City; State; Zip Code San Diego, CA 92115-3525	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/828 Rpt: 68/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomberg, Victor <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92115-3525	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomsburgh, Terry <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94709-1435	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomsburgh, Terry <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94709-1435	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomsburgh, Terry <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94709-1435	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomsburgh, Terry <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94709-1435	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/828 Rpt: 69/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomsburgh, Terry <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94709-1435	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blume, James <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705-1603	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blume, James <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705-1603	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blume, James <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705-1603	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/828 Rpt: 70/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/828 Rpt: 71/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/828 Rpt: 72/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blumenfeld, Gina	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Los Angeles, CA 90038-3315		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boast, Molly	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Brooklyn, NY 11238-5618		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/828 Rpt: 73/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogolub, Larry <hr/> 6 Contributor address; City; State; Zip Code Saint Paul, MN 55105-2216	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogolub, Larry <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55105-2216	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boise, Glen R. <hr/> Contributor address; City; State; Zip Code Kokomo, IN 46901-4227	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boise, Glen R. <hr/> Contributor address; City; State; Zip Code Kokomo, IN 46901-4227	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boise, Glen R. <hr/> Contributor address; City; State; Zip Code Kokomo, IN 46901-4227	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/828 Rpt: 74/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boise, Glen R. <hr/> 6 Contributor address; City; State; Zip Code Kokomo, IN 46901-4227	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boles, Sarah <hr/> Contributor address; City; State; Zip Code Norwalk, CT 06853-1711	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boles, Sarah <hr/> Contributor address; City; State; Zip Code Norwalk, CT 06853-1711	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boothe, Barry <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115-1117	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boothe, Barry <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115-1117	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/828 Rpt: 75/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boothe, Barry <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94115-1117	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boothe, Barry <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115-1117	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordin, Claudia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95816-3901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordin, Claudia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95816-3901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordin, Claudia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95816-3901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/828 Rpt: 76/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordin, Claudia	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Sacramento, CA 95816-3901	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordin, Claudia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sacramento, CA 95816-3901	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordin, Claudia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sacramento, CA 95816-3901	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P.	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P.	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/828 Rpt: 77/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P. <hr/> 6 Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P. <hr/> Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P. <hr/> Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P. <hr/> Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P. <hr/> Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/828 Rpt: 78/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P.	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/828 Rpt: 79/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P. <hr/> 6 Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P. <hr/> Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouffard, Maurice P. <hr/> Contributor address; City; State; Zip Code St Johnsbury, VT 05819-1448	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowron, Scott <hr/> Contributor address; City; State; Zip Code Trinidad, CO 81082-1554	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyan, Elise <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-6148	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/828 Rpt: 80/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyan, Elise <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209-6148	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyan, Elise <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-6148	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyan, Elise <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-6148	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boylan, Elizabeth <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538-1912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boylan, Elizabeth <hr/> Contributor address; City; State; Zip Code Larchmont, NY 10538-1912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/828 Rpt: 81/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boylan, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Larchmont, NY 10538-1912	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Jonathan <hr/> Contributor address; City; State; Zip Code Kamas, UT 84036-5027	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Jonathan <hr/> Contributor address; City; State; Zip Code Kamas, UT 84036-5027	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Jonathan <hr/> Contributor address; City; State; Zip Code Kamas, UT 84036-5027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Jonathan <hr/> Contributor address; City; State; Zip Code Kamas, UT 84036-5027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/828 Rpt: 82/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Kamas, UT 84036-5027	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Jonathan <hr/> Contributor address; City; State; Zip Code Kamas, UT 84036-5027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannan, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10011-5473	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brazen, Steve <hr/> Contributor address; City; State; Zip Code Palm Coast, FL 32137-1628	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/828 Rpt: 83/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> 6 Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/828 Rpt: 84/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> 6 Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/828 Rpt: 85/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> 6 Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/828 Rpt: 86/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda	7 Amount of Contribution (\$) \$3.00
	6 Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/828 Rpt: 87/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> 6 Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bright, Linda <hr/> Contributor address; City; State; Zip Code Happy Valley, OR 97086-7811	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/828 Rpt: 88/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brilliant, Andrew <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80206-4247	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brilliant, Andrew <hr/> Contributor address; City; State; Zip Code Denver, CO 80206-4247	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brilliant, Andrew <hr/> Contributor address; City; State; Zip Code Denver, CO 80206-4247	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brindel, Annika <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406-1315	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britton, Constance <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90025-5249	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/828 Rpt: 89/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brockett, Roger	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Milford, CT 06460-5442		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broner, Katherine	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code San Francisco, CA 94127-1819		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broner, Katherine	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code San Francisco, CA 94127-1819		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broner, Katherine	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Francisco, CA 94127-1819		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broner, Katherine	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Francisco, CA 94127-1819		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/828 Rpt: 90/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broner, Katherine <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94127-1819	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broner, Katherine <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94127-1819	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Shirley E. <hr/> Contributor address; City; State; Zip Code Martinez, GA 30907-1303	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Shirley E. <hr/> Contributor address; City; State; Zip Code Martinez, GA 30907-1303	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Shirley E. <hr/> Contributor address; City; State; Zip Code Martinez, GA 30907-1303	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/828 Rpt: 91/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Shirley E.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Martinez, GA 30907-1303	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Shirley E.	Amount of Contribution (\$) \$26.00
	Contributor address; City; State; Zip Code Martinez, GA 30907-1303	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Colin	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Lighthouse Point, FL 33064-8119	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) JM Family Enterprises Inc.
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lynne	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Philadelphia, PA 19119-3346	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lynne	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Philadelphia, PA 19119-3346	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/828 Rpt: 92/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lynne <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19119-3346	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lynne <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19119-3346	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lynne <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19119-3346	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mark <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-7988	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mark <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-7988	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/828 Rpt: 93/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mark	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Chapel Hill, NC 27516-7988		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mark	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chapel Hill, NC 27516-7988		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mark	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chapel Hill, NC 27516-7988		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Nicholas	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Providence, RI 02903-2919		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Nicholas	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Providence, RI 02903-2919		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/828 Rpt: 94/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Nicholas <hr/> 6 Contributor address; City; State; Zip Code Providence, RI 02903-2919	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Nicholas <hr/> Contributor address; City; State; Zip Code Providence, RI 02903-2919	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Nicholas <hr/> Contributor address; City; State; Zip Code Providence, RI 02903-2919	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Thomas A. <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126-1228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Thomas A. <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126-1228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/828 Rpt: 95/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Thomas A.	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code San Diego, CA 92126-1228		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Thomas A.	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code San Diego, CA 92126-1228		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Thomas A.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Diego, CA 92126-1228		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Thomas A.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Diego, CA 92126-1228		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Thomas A.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code San Diego, CA 92126-1228		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/828 Rpt: 96/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-2355	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/828 Rpt: 97/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-2355	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/828 Rpt: 98/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-2355	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/828 Rpt: 99/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-2355	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/828 Rpt: 100/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-2355	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2355	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/828 Rpt: 101/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruckner, Steven <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97210-3770	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruckner, Steven <hr/> Contributor address; City; State; Zip Code Portland, OR 97210-3770	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruckner, Steven <hr/> Contributor address; City; State; Zip Code Portland, OR 97210-3770	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruckner, Steven <hr/> Contributor address; City; State; Zip Code Portland, OR 97210-3770	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruckner, Steven <hr/> Contributor address; City; State; Zip Code Portland, OR 97210-3770	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/828 Rpt: 102/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brummett, Elaine <hr/> 6 Contributor address; City; State; Zip Code Asheville, NC 28803-1987	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruschke, Gene <hr/> Contributor address; City; State; Zip Code Hudson, NY 12534-3805	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruschke, Gene <hr/> Contributor address; City; State; Zip Code Hudson, NY 12534-3805	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruschke, Gene <hr/> Contributor address; City; State; Zip Code Hudson, NY 12534-3805	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant-Jones, Gwendolyn <hr/> Contributor address; City; State; Zip Code Bowie, MD 20720-3497	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/828 Rpt: 103/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant-Jones, Gwendolyn <hr/> 6 Contributor address; City; State; Zip Code Bowie, MD 20720-3497	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Campbell <hr/> Contributor address; City; State; Zip Code Asheville, NC 28804-2846	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bugatto, Henry <hr/> Contributor address; City; State; Zip Code San Jose, CA 95129-3156	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bugatto, Henry <hr/> Contributor address; City; State; Zip Code San Jose, CA 95129-3156	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buhler, Lynn <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21201-4586	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) TPAG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/828 Rpt: 104/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burchfield, Sarah <hr/> 6 Contributor address; City; State; Zip Code Greenville, SC 29607-4044	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burchfield, Sarah <hr/> Contributor address; City; State; Zip Code Greenville, SC 29607-4044	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burchfield, Sarah <hr/> Contributor address; City; State; Zip Code Greenville, SC 29607-4044	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burchfield, Sarah <hr/> Contributor address; City; State; Zip Code Greenville, SC 29607-4044	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkett, Delbert <hr/> Contributor address; City; State; Zip Code Baton Rouge, LA 70808-5620	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/828 Rpt: 105/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burks, Clyde <hr/> 6 Contributor address; City; State; Zip Code Flossmoor, IL 60422-1610	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burks, Clyde <hr/> Contributor address; City; State; Zip Code Flossmoor, IL 60422-1610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burks, Clyde <hr/> Contributor address; City; State; Zip Code Flossmoor, IL 60422-1610	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, William <hr/> Contributor address; City; State; Zip Code Spring Grove, IL 60081-8953	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, William <hr/> Contributor address; City; State; Zip Code Spring Grove, IL 60081-8953	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/828 Rpt: 106/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, William <hr/> 6 Contributor address; City; State; Zip Code Spring Grove, IL 60081-8953	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, William <hr/> Contributor address; City; State; Zip Code Spring Grove, IL 60081-8953	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, William <hr/> Contributor address; City; State; Zip Code Spring Grove, IL 60081-8953	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, William <hr/> Contributor address; City; State; Zip Code Spring Grove, IL 60081-8953	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnsed, Linda <hr/> Contributor address; City; State; Zip Code Franklin, TN 37064-9325	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/828 Rpt: 107/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnsed, Linda <hr/> 6 Contributor address; City; State; Zip Code Franklin, TN 37064-9325	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnsed, Linda <hr/> Contributor address; City; State; Zip Code Franklin, TN 37064-9325	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnsed, Linda <hr/> Contributor address; City; State; Zip Code Franklin, TN 37064-9325	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnsed, Linda <hr/> Contributor address; City; State; Zip Code Franklin, TN 37064-9325	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnsed, Linda <hr/> Contributor address; City; State; Zip Code Franklin, TN 37064-9325	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/828 Rpt: 108/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnsed, Linda <hr/> 6 Contributor address; City; State; Zip Code Franklin, TN 37064-9325	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Richard <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19146-4703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Richard <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19146-4703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Richard <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19146-4703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Jim <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-3101	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/828 Rpt: 109/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Jim <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704-3101	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Jim <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-3101	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadden, Wendyn <hr/> Contributor address; City; State; Zip Code Las Vegas, NM 87701-0756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadden, Wendyn <hr/> Contributor address; City; State; Zip Code Las Vegas, NM 87701-0756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cahoon, Bruce <hr/> Contributor address; City; State; Zip Code Black Mountain, NC 28711-9428	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/828 Rpt: 110/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Connie	7 Amount of Contribution (\$) \$113.00
6 Contributor address; City; State; Zip Code Los Angeles, CA 90066-3109		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Connie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Los Angeles, CA 90066-3109		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callender, Dale	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Monroe, NJ 08831-3735		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callender, Dale	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Monroe, NJ 08831-3735		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callender, Dale	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Monroe, NJ 08831-3735		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/828 Rpt: 111/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callender, Dale <hr/> 6 Contributor address; City; State; Zip Code Monroe, NJ 08831-3735	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Joslyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77021-1504	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canavarro, Mark <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92011-3809	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canavarro, Mark <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92011-3809	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan <hr/> Contributor address; City; State; Zip Code Portland, OR 97206-1306	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/828 Rpt: 112/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Portland, OR 97206-1306		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/828 Rpt: 113/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Portland, OR 97206-1306		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/828 Rpt: 114/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Portland, OR 97206-1306		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Portland, OR 97206-1306		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Careddu, Katherine	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code New York, NY 10027-4728		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/828 Rpt: 115/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carleton, Peter <hr/> 6 Contributor address; City; State; Zip Code Portland, ME 04102-3848	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carleton, Peter <hr/> Contributor address; City; State; Zip Code Portland, ME 04102-3848	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carleton, Peter <hr/> Contributor address; City; State; Zip Code Portland, ME 04102-3848	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carleton, Peter <hr/> Contributor address; City; State; Zip Code Portland, ME 04102-3848	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carleton, Peter <hr/> Contributor address; City; State; Zip Code Portland, ME 04102-3848	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/828 Rpt: 116/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carleton, Peter	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Portland, ME 04102-3848		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carleton, Peter	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Portland, ME 04102-3848		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carleton, Peter	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Portland, ME 04102-3848		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Keith	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Vermillion, MN 55085-0209		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Keith	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Vermillion, MN 55085-0209		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/828 Rpt: 117/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Keith <hr/> 6 Contributor address; City; State; Zip Code Vermillion, MN 55085-0209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Janice <hr/> Contributor address; City; State; Zip Code Newark, DE 19713-4007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Janice <hr/> Contributor address; City; State; Zip Code Newark, DE 19713-4007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Janice <hr/> Contributor address; City; State; Zip Code Newark, DE 19713-4007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Janice <hr/> Contributor address; City; State; Zip Code Newark, DE 19713-4007	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/828 Rpt: 118/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Janice <hr/> 6 Contributor address; City; State; Zip Code Newark, DE 19713-4007	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Janice <hr/> Contributor address; City; State; Zip Code Newark, DE 19713-4007	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Robert <hr/> Contributor address; City; State; Zip Code Bainbridge Island, WA 98110	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cashman, Mark <hr/> Contributor address; City; State; Zip Code Stevensville, MD 21666-2289	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassery, James <hr/> Contributor address; City; State; Zip Code Washington, DC 20008-1038	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/828 Rpt: 119/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casserly, James <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20008-1038	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casserly, James <hr/> Contributor address; City; State; Zip Code Washington, DC 20008-1038	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Cecelia <hr/> Contributor address; City; State; Zip Code Vancouver, WA 98686-2651	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Cecelia <hr/> Contributor address; City; State; Zip Code Vancouver, WA 98686-2651	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catania, A. Charles <hr/> Contributor address; City; State; Zip Code Columbia, MD 21044-2420	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/828 Rpt: 120/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecil, Janice <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94705-2321	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaffee, Dianne <hr/> Contributor address; City; State; Zip Code Bothell, WA 98021-8625	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaffee, Dianne <hr/> Contributor address; City; State; Zip Code Bothell, WA 98021-8625	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaffee, Dianne <hr/> Contributor address; City; State; Zip Code Bothell, WA 98021-8625	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, David <hr/> Contributor address; City; State; Zip Code Dublin, OH 43017-2939	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/828 Rpt: 121/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, David <hr/> 6 Contributor address; City; State; Zip Code Dublin, OH 43017-2939	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, David <hr/> Contributor address; City; State; Zip Code Dublin, OH 43017-2939	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, David <hr/> Contributor address; City; State; Zip Code Dublin, OH 43017-2939	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavous, Donna <hr/> Contributor address; City; State; Zip Code West Hollywood, CA 90046-5812	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavous, Donna <hr/> Contributor address; City; State; Zip Code West Hollywood, CA 90046-5812	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/828 Rpt: 122/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavous, Donna	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code West Hollywood, CA 90046-5812		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavous, Donna	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code West Hollywood, CA 90046-5812		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavous, Donna	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code West Hollywood, CA 90046-5812		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavous, Donna	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code West Hollywood, CA 90046-5812		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavous, Donna	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code West Hollywood, CA 90046-5812		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/828 Rpt: 123/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavous, Donna <hr/> 6 Contributor address; City; State; Zip Code West Hollywood, CA 90046-5812	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Alan <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90025-3715	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheren, Mark <hr/> Contributor address; City; State; Zip Code Cleveland, OH 44120-2460	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, R. Leslie <hr/> Contributor address; City; State; Zip Code Glendale, CA 91208-1719	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, R. Leslie <hr/> Contributor address; City; State; Zip Code Glendale, CA 91208-1719	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/828 Rpt: 124/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, R. Leslie <hr/> 6 Contributor address; City; State; Zip Code Glendale, CA 91208-1719	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, R. Leslie <hr/> Contributor address; City; State; Zip Code Glendale, CA 91208-1719	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, R. Leslie <hr/> Contributor address; City; State; Zip Code Glendale, CA 91208-1719	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, R. Leslie <hr/> Contributor address; City; State; Zip Code Glendale, CA 91208-1719	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choi, R. Leslie <hr/> Contributor address; City; State; Zip Code Glendale, CA 91208-1719	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/828 Rpt: 125/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/828 Rpt: 126/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chouinard, Susan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Baltimore, MD 21209-3836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/828 Rpt: 127/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chromiak, Stephen <hr/> 6 Contributor address; City; State; Zip Code Mobile, AL 36695-2546	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chromiak, Stephen <hr/> Contributor address; City; State; Zip Code Mobile, AL 36695-2546	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chromiak, Stephen <hr/> Contributor address; City; State; Zip Code Mobile, AL 36695-2546	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chu, George H. <hr/> Contributor address; City; State; Zip Code Tiburon, CA 94920-1511	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ciano, Joan <hr/> Contributor address; City; State; Zip Code Hamden, CT 06514-3117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/828 Rpt: 128/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ciano, Joan <hr/> 6 Contributor address; City; State; Zip Code Hamden, CT 06514-3117	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ciano, Joan <hr/> Contributor address; City; State; Zip Code Hamden, CT 06514-3117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ciano, Joan <hr/> Contributor address; City; State; Zip Code Hamden, CT 06514-3117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ciardi, Robert <hr/> Contributor address; City; State; Zip Code Irwin, PA 15642-9496	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cibrowski, Leona <hr/> Contributor address; City; State; Zip Code Athens, OH 45701-1706	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/828 Rpt: 129/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cibrowski, Leona <hr/> 6 Contributor address; City; State; Zip Code Athens, OH 45701-1706	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cibrowski, Leona <hr/> Contributor address; City; State; Zip Code Athens, OH 45701-1706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cibrowski, Leona <hr/> Contributor address; City; State; Zip Code Athens, OH 45701-1706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cibrowski, Leona <hr/> Contributor address; City; State; Zip Code Athens, OH 45701-1706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cibrowski, Leona <hr/> Contributor address; City; State; Zip Code Athens, OH 45701-1706	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/828 Rpt: 130/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cibrowski, Leona <hr/> 6 Contributor address; City; State; Zip Code Athens, OH 45701-1706	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Marjorie <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22911-8711	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Marjorie <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22911-8711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Michael A. <hr/> Contributor address; City; State; Zip Code Holt, MI 48842-1927	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Michael A. <hr/> Contributor address; City; State; Zip Code Holt, MI 48842-1927	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/828 Rpt: 131/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Michael A. <hr/> 6 Contributor address; City; State; Zip Code Holt, MI 48842-1927	7 Amount of Contribution (\$) \$73.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Michael A. <hr/> Contributor address; City; State; Zip Code Holt, MI 48842-1927	Amount of Contribution (\$) \$73.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Vicki <hr/> Contributor address; City; State; Zip Code Kuna, ID 83634-1200	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleveland, Barbara C. <hr/> Contributor address; City; State; Zip Code Washington, DC 20009-2224	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleveland, Barbara C. <hr/> Contributor address; City; State; Zip Code Washington, DC 20009-2224	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/828 Rpt: 132/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleveland, Barbara C. <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20009-2224	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleveland, Barbara C. <hr/> Contributor address; City; State; Zip Code Washington, DC 20009-2224	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clevesy, Sharon <hr/> Contributor address; City; State; Zip Code Auburn, CA 95602-9241	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clevesy, Sharon <hr/> Contributor address; City; State; Zip Code Auburn, CA 95602-9241	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clevesy, Sharon <hr/> Contributor address; City; State; Zip Code Auburn, CA 95602-9241	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/828 Rpt: 133/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clevesy, Sharon	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Auburn, CA 95602-9241		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clinton, Jeanne	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Berkeley, CA 94705-1065		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clinton, Jeanne	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Berkeley, CA 94705-1065		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Gastonia, NC 28054-7700		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Gastonia, NC 28054-7700		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/828 Rpt: 134/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty <hr/> 6 Contributor address; City; State; Zip Code Gastonia, NC 28054-7700	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty <hr/> Contributor address; City; State; Zip Code Gastonia, NC 28054-7700	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty <hr/> Contributor address; City; State; Zip Code Gastonia, NC 28054-7700	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty <hr/> Contributor address; City; State; Zip Code Gastonia, NC 28054-7700	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty <hr/> Contributor address; City; State; Zip Code Gastonia, NC 28054-7700	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/828 Rpt: 135/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Gastonia, NC 28054-7700		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Gastonia, NC 28054-7700		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Gastonia, NC 28054-7700		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Gastonia, NC 28054-7700		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Gastonia, NC 28054-7700		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/828 Rpt: 136/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty <hr/> 6 Contributor address; City; State; Zip Code Gastonia, NC 28054-7700	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Betty <hr/> Contributor address; City; State; Zip Code Gastonia, NC 28054-7700	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cocks, Pamela <hr/> Contributor address; City; State; Zip Code Saint Helena, CA 94574-2061	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cocks, Pamela <hr/> Contributor address; City; State; Zip Code Saint Helena, CA 94574-2061	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cocks, Pamela <hr/> Contributor address; City; State; Zip Code Saint Helena, CA 94574-2061	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/828 Rpt: 137/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Nancy <hr/> 6 Contributor address; City; State; Zip Code Takoma Park, MD 20912-4137	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Nancy <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912-4137	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Stuart <hr/> Contributor address; City; State; Zip Code Annapolis, MD 21401-2715	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohn, Ronald <hr/> Contributor address; City; State; Zip Code Carmel Valley, CA 93924-9421	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Henry <hr/> Contributor address; City; State; Zip Code Rehoboth Beach, DE 19971-4101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/828 Rpt: 138/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Henry <hr/> 6 Contributor address; City; State; Zip Code Rehoboth Beach, DE 19971-4101	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Henry <hr/> Contributor address; City; State; Zip Code Rehoboth Beach, DE 19971-4101	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colis, Minou <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025-3216	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colis, Minou <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025-3216	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collie, James M. <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/828 Rpt: 139/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collie, James M.	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collie, James M.	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collie, James M.	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collie, James M.	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Ryan	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Alexandria, VA 22302-4023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/828 Rpt: 140/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Congdon, Sarah <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85728-5807	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Congdon, Sarah <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85728-5807	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Congdon, Sarah <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85728-5807	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Congdon, Sarah <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85728-5807	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Congdon, Sarah <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85728-5807	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/828 Rpt: 141/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conley, Christine <hr/> 6 Contributor address; City; State; Zip Code Memphis, TN 38104-5825	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/828 Rpt: 142/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> 6 Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/828 Rpt: 143/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> 6 Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Heidi <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98004-6092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coomber, Charles <hr/> Contributor address; City; State; Zip Code Federal Way, WA 98023-3556	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Christin <hr/> Contributor address; City; State; Zip Code Aspen, CO 81611-2612	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/828 Rpt: 144/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copen, Laurin <hr/> 6 Contributor address; City; State; Zip Code Sag Harbor, NY 11963-2662	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copen, Laurin <hr/> Contributor address; City; State; Zip Code Sag Harbor, NY 11963-2662	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copen, Laurin <hr/> Contributor address; City; State; Zip Code Sag Harbor, NY 11963-2662	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copen, Laurin <hr/> Contributor address; City; State; Zip Code Sag Harbor, NY 11963-2662	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copen, Laurin <hr/> Contributor address; City; State; Zip Code Sag Harbor, NY 11963-2662	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/828 Rpt: 145/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copen, Laurin	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Sag Harbor, NY 11963-2662		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copen, Laurin	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Sag Harbor, NY 11963-2662		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corash, David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Miami, FL 33156-4616		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corash, David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Miami, FL 33156-4616		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corash, David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Miami, FL 33156-4616		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/828 Rpt: 146/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Stephen <hr/> 6 Contributor address; City; State; Zip Code Tillamook, OR 97141-9598	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Stephen <hr/> Contributor address; City; State; Zip Code Tillamook, OR 97141-9598	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Stephen <hr/> Contributor address; City; State; Zip Code Tillamook, OR 97141-9598	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Stephen <hr/> Contributor address; City; State; Zip Code Tillamook, OR 97141-9598	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Stephen <hr/> Contributor address; City; State; Zip Code Tillamook, OR 97141-9598	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/828 Rpt: 147/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corelli, Cara <hr/> 6 Contributor address; City; State; Zip Code Troy, NY 12180-4713	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corelli, Cara <hr/> Contributor address; City; State; Zip Code Troy, NY 12180-4713	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coss, Shelley <hr/> Contributor address; City; State; Zip Code Arlington, VA 22204-3020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coss, Shelley <hr/> Contributor address; City; State; Zip Code Arlington, VA 22204-3020	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coss, Shelley <hr/> Contributor address; City; State; Zip Code Arlington, VA 22204-3020	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/828 Rpt: 148/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/828 Rpt: 149/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cossutta, Louis M.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chilmark, MA 02535-2108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costello, Sam	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Marlboro, VT 05344		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/828 Rpt: 151/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Bennett <hr/> 6 Contributor address; City; State; Zip Code Bristol, TN 37620-4937	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coy, Roderick <hr/> Contributor address; City; State; Zip Code East Lansing, MI 48823-9740	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coyle, Kathryn <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277-6285	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig-Scheckman, Sara <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80477-6429	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Philanthropist		Employer (See Instructions) Craig Scheckman Family Foundation
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craxton, Ann <hr/> Contributor address; City; State; Zip Code Hanover, NH 03755	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craxton, Ann	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Hanover, NH 03755		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creighton, Kathleen	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Brooklyn, NY 11205-4261		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crichton, Roni	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Santa Monica, CA 90405-2916		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cron, Steve	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Pacific Palisades, CA 90272-2153		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cron, Steve	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Pacific Palisades, CA 90272-2153		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crow, Steven <hr/> 6 Contributor address; City; State; Zip Code Long Beach, CA 90808-1929	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crow, Steven <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90808-1929	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
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Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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SCHEDULE A1

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Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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SCHEDULE A1

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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> 6 Contributor address; City; State; Zip Code Aurora, CO 80017-3384	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017-3384	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/828 Rpt: 157/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Aurora, CO 80017-3384		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Aurora, CO 80017-3384		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Aurora, CO 80017-3384		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Aurora, CO 80017-3384		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy	Amount of Contribution (\$) \$5.00
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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cryer, Jon <hr/> 6 Contributor address; City; State; Zip Code Santa Clarita, CA 91350-2374	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Actor		9 Employer (See Instructions) Self Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cryer, Jon <hr/> Contributor address; City; State; Zip Code Santa Clarita, CA 91350-2374	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Self Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cryer, Jon <hr/> Contributor address; City; State; Zip Code Santa Clarita, CA 91350-2374	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Self Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cryer, Jon <hr/> Contributor address; City; State; Zip Code Santa Clarita, CA 91350-2374	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Self Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> Contributor address; City; State; Zip Code New Haven, CT 06511-1228	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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SCHEDULE A1

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8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> Contributor address; City; State; Zip Code New Haven, CT 06511-1228	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> Contributor address; City; State; Zip Code New Haven, CT 06511-1228	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> Contributor address; City; State; Zip Code New Haven, CT 06511-1228	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> Contributor address; City; State; Zip Code New Haven, CT 06511-1228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> 6 Contributor address; City; State; Zip Code New Haven, CT 06511-1228	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> Contributor address; City; State; Zip Code New Haven, CT 06511-1228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> Contributor address; City; State; Zip Code New Haven, CT 06511-1228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> Contributor address; City; State; Zip Code New Haven, CT 06511-1228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> Contributor address; City; State; Zip Code New Haven, CT 06511-1228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/828 Rpt: 161/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Jan <hr/> 6 Contributor address; City; State; Zip Code New Haven, CT 06511-1228	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Sharon <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-2037	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Susan <hr/> Contributor address; City; State; Zip Code Madison, WI 53704-5547	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Susan <hr/> Contributor address; City; State; Zip Code Madison, WI 53704-5547	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Susan <hr/> Contributor address; City; State; Zip Code Madison, WI 53704-5547	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/828 Rpt: 162/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Susan	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Madison, WI 53704-5547		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalia, George C.	Amount of Contribution (\$) \$36.00
Contributor address; City; State; Zip Code Avondale Estates, GA 30002-1405		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalia, George C.	Amount of Contribution (\$) \$36.00
Contributor address; City; State; Zip Code Avondale Estates, GA 30002-1405		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalia, George C.	Amount of Contribution (\$) \$36.00
Contributor address; City; State; Zip Code Avondale Estates, GA 30002-1405		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalia, George C.	Amount of Contribution (\$) \$36.00
Contributor address; City; State; Zip Code Avondale Estates, GA 30002-1405		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/828 Rpt: 163/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalrymple-Hollo, Jane <hr/> 6 Contributor address; City; State; Zip Code Boulder, CO 80304-2208	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalton, Daniel <hr/> Contributor address; City; State; Zip Code Clayton, NJ 08312-1334	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalton, Daniel <hr/> Contributor address; City; State; Zip Code Clayton, NJ 08312-1334	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalton, Daniel <hr/> Contributor address; City; State; Zip Code Clayton, NJ 08312-1334	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davies, Lea <hr/> Contributor address; City; State; Zip Code Lakeville, CT 06039-1314	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 160/828 Rpt: 164/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davies, Lea <hr/> 6 Contributor address; City; State; Zip Code Lakeville, CT 06039-1314	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davies, Toni <hr/> Contributor address; City; State; Zip Code Del Mar, CA 92014-3019	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davies, Toni <hr/> Contributor address; City; State; Zip Code Del Mar, CA 92014-3019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davies, Toni <hr/> Contributor address; City; State; Zip Code Del Mar, CA 92014-3019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Donald <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22306-2559	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 161/828 Rpt: 165/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Elizabeth C. <hr/> 6 Contributor address; City; State; Zip Code Pomona, CA 91767-2085	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Elizabeth C. <hr/> Contributor address; City; State; Zip Code Pomona, CA 91767-2085	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, James H. <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-9900	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marian <hr/> Contributor address; City; State; Zip Code Portland, OR 97221-2737	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marian <hr/> Contributor address; City; State; Zip Code Portland, OR 97221-2737	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 162/828 Rpt: 166/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marian <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97221-2737	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marian <hr/> Contributor address; City; State; Zip Code Portland, OR 97221-2737	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marian <hr/> Contributor address; City; State; Zip Code Portland, OR 97221-2737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marian <hr/> Contributor address; City; State; Zip Code Portland, OR 97221-2737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marian <hr/> Contributor address; City; State; Zip Code Portland, OR 97221-2737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/828 Rpt: 167/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marian <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97221-2737	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mark <hr/> Contributor address; City; State; Zip Code San Jose, CA 95125-4021	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> Contributor address; City; State; Zip Code Naples, FL 34110-2700	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> Contributor address; City; State; Zip Code Naples, FL 34110-2700	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> Contributor address; City; State; Zip Code Naples, FL 34110-2700	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/828 Rpt: 168/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> 6 Contributor address; City; State; Zip Code Naples, FL 34110-2700	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> Contributor address; City; State; Zip Code Naples, FL 34110-2700	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> Contributor address; City; State; Zip Code Naples, FL 34110-2700	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> Contributor address; City; State; Zip Code Naples, FL 34110-2700	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> Contributor address; City; State; Zip Code Naples, FL 34110-2700	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/828 Rpt: 169/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> 6 Contributor address; City; State; Zip Code Naples, FL 34110-2700	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> Contributor address; City; State; Zip Code Naples, FL 34110-2700	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samuel <hr/> Contributor address; City; State; Zip Code Naples, FL 34110-2700	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Susan <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22306-2559	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 166/828 Rpt: 170/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/828 Rpt: 171/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 168/828 Rpt: 172/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/828 Rpt: 173/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/828 Rpt: 174/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Brent <hr/> 6 Contributor address; City; State; Zip Code Lancaster, CA 93534-4428	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Loizaga, Adela <hr/> Contributor address; City; State; Zip Code Norwalk, CT 06850-2707	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Loizaga, Adela <hr/> Contributor address; City; State; Zip Code Norwalk, CT 06850-2707	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Loizaga, Adela <hr/> Contributor address; City; State; Zip Code Norwalk, CT 06850-2707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Loizaga, Adela <hr/> Contributor address; City; State; Zip Code Norwalk, CT 06850-2707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/828 Rpt: 175/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Loizaga, Adela <hr/> 6 Contributor address; City; State; Zip Code Norwalk, CT 06850-2707	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Loizaga, Adela <hr/> Contributor address; City; State; Zip Code Norwalk, CT 06850-2707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Rosa, Francis <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94121-1034	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Energy Consultant		Employer (See Instructions) DeRosa Advisors
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deary, Daniel <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32968-5069	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deary, Daniel <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32968-5069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/828 Rpt: 176/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debell, John <hr/> 6 Contributor address; City; State; Zip Code Menlo Park, CA 94025-3243	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debell, John <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-3243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debusschere, Molly <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201-4790	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debusschere, Molly <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201-4790	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decesare, Judy <hr/> Contributor address; City; State; Zip Code Davis, CA 95616-2910	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/828 Rpt: 177/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decesare, Judy <hr/> 6 Contributor address; City; State; Zip Code Davis, CA 95616-2910	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decesare, Judy <hr/> Contributor address; City; State; Zip Code Davis, CA 95616-2910	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decesare, Judy <hr/> Contributor address; City; State; Zip Code Davis, CA 95616-2910	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deiningner, James <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deiningner, James <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/828 Rpt: 178/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deining, James	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Albuquerque, NM 87109		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deining, James	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Albuquerque, NM 87109		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delacy, Patricia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Phila, PA 19111-4414		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delacy, Patricia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Phila, PA 19111-4414		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delacy, Patricia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Phila, PA 19111-4414		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 175/828 Rpt: 179/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delacy, Patricia <hr/> 6 Contributor address; City; State; Zip Code Phila, PA 19111-4414	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denniston, Elliott <hr/> Contributor address; City; State; Zip Code Webb City, MO 64870-8107	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denslow, Susan <hr/> Contributor address; City; State; Zip Code Richland, WA 99352-7622	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denslow, Susan <hr/> Contributor address; City; State; Zip Code Richland, WA 99352-7622	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denslow, Susan <hr/> Contributor address; City; State; Zip Code Richland, WA 99352-7622	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/828 Rpt: 180/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denslow, Susan	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Richland, WA 99352-7622		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrickson, Scott	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Front Royal, VA 22630-9340		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrickson, Scott	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Front Royal, VA 22630-9340		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrickson, Scott	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Front Royal, VA 22630-9340		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrickson, Scott	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Front Royal, VA 22630-9340		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/828 Rpt: 181/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrickson, Scott <hr/> 6 Contributor address; City; State; Zip Code Front Royal, VA 22630-9340	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrough, Roger <hr/> Contributor address; City; State; Zip Code Weaverville, NC 28787-8702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrough, Roger <hr/> Contributor address; City; State; Zip Code Weaverville, NC 28787-8702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrough, Roger <hr/> Contributor address; City; State; Zip Code Weaverville, NC 28787-8702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrough, Roger <hr/> Contributor address; City; State; Zip Code Weaverville, NC 28787-8702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/828 Rpt: 182/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desch, Gerald P. <hr/> 6 Contributor address; City; State; Zip Code Dayton, OH 45414-1906	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desch, Gerald P. <hr/> Contributor address; City; State; Zip Code Dayton, OH 45414-1906	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desch, Gerald P. <hr/> Contributor address; City; State; Zip Code Dayton, OH 45414-1906	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desch, Gerald P. <hr/> Contributor address; City; State; Zip Code Dayton, OH 45414-1906	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desch, Gerald P. <hr/> Contributor address; City; State; Zip Code Dayton, OH 45414-1906	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/828 Rpt: 183/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desjardin, Marie	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Westminster, CO 80031-7906		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Desjardin, Marie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Westminster, CO 80031-7906		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deutchman, Arnold	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Teaneck, NJ 07666-1600		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deutchman, Arnold	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Teaneck, NJ 07666-1600		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devries, Carol	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Greensboro, NC 27410-2192		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/828 Rpt: 184/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devries, Carol <hr/> 6 Contributor address; City; State; Zip Code Greensboro, NC 27410-2192	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devries, Carol <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27410-2192	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devries, Carol <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27410-2192	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devries, Carol <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27410-2192	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devries, Carol <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27410-2192	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/828 Rpt: 185/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devries, Carol	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Greensboro, NC 27410-2192		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devries, Carol	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Greensboro, NC 27410-2192		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewitt, Kathleen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Williamson, NY 14589-9758		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewitt, Kathleen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Williamson, NY 14589-9758		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewitt, Kathleen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Williamson, NY 14589-9758		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/828 Rpt: 186/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewitt, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Williamson, NY 14589-9758	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewitt, Kathleen <hr/> Contributor address; City; State; Zip Code Williamson, NY 14589-9758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewitt, Kathleen <hr/> Contributor address; City; State; Zip Code Williamson, NY 14589-9758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewitt, Kathleen <hr/> Contributor address; City; State; Zip Code Williamson, NY 14589-9758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewitt, Kathleen <hr/> Contributor address; City; State; Zip Code Williamson, NY 14589-9758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/828 Rpt: 187/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diamondstone, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11201-5632	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diamondstone, Kenneth <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-5632	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diamondstone, Kenneth <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-5632	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diamondstone, Kenneth <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-5632	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diamondstone, Kenneth <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-5632	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/828 Rpt: 188/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Alyce M. <hr/> 6 Contributor address; City; State; Zip Code Yardley, PA 19067-3060	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diffley, Lisa <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-3579	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diffley, Lisa <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-3579	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dilenschneider, Kathy <hr/> Contributor address; City; State; Zip Code Glenmoore, PA 19343-1617	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Mark <hr/> Contributor address; City; State; Zip Code Poway, CA 92064-2353	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/828 Rpt: 189/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Mark <hr/> 6 Contributor address; City; State; Zip Code Poway, CA 92064-2353	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Mark <hr/> Contributor address; City; State; Zip Code Poway, CA 92064-2353	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Mark <hr/> Contributor address; City; State; Zip Code Poway, CA 92064-2353	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dimarco, Shelli <hr/> Contributor address; City; State; Zip Code Nashville, TN 37211-6721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dimarco, Shelli <hr/> Contributor address; City; State; Zip Code Nashville, TN 37211-6721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/828 Rpt: 190/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dix, Rollin <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60643-2037	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dix, Rollin <hr/> Contributor address; City; State; Zip Code Chicago, IL 60643-2037	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dix, Rollin <hr/> Contributor address; City; State; Zip Code Chicago, IL 60643-2037	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dix, Rollin <hr/> Contributor address; City; State; Zip Code Chicago, IL 60643-2037	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dix, Rollin <hr/> Contributor address; City; State; Zip Code Chicago, IL 60643-2037	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/828 Rpt: 191/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dix, Rollin <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60643-2037	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dix, Rollin <hr/> Contributor address; City; State; Zip Code Chicago, IL 60643-2037	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dix, Rollin <hr/> Contributor address; City; State; Zip Code Chicago, IL 60643-2037	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doland, Marie <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87104-1125	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolgireff, Natalie <hr/> Contributor address; City; State; Zip Code Hillsborough, NC 27278-2010	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/828 Rpt: 192/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolgireff, Natalie <hr/> 6 Contributor address; City; State; Zip Code Hillsborough, NC 27278-2010	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald, Bruce <hr/> Contributor address; City; State; Zip Code Winchester, MA 01890-2423	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnelly, Robert <hr/> Contributor address; City; State; Zip Code Mendota Heights, MN 55118-1746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnelly, Robert <hr/> Contributor address; City; State; Zip Code Mendota Heights, MN 55118-1746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorek, Gary <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55401-1833	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/828 Rpt: 193/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dougherty, Mary <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60613-1313	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doughty, Lisa <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-2025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doughty, Lisa <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-2025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doughty, Lisa <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-2025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowling, Patrick <hr/> Contributor address; City; State; Zip Code Sherman Oaks, CA 91403-4439	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/828 Rpt: 194/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowling, Patrick <hr/> 6 Contributor address; City; State; Zip Code Sherman Oaks, CA 91403-4439	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowling, Patrick <hr/> Contributor address; City; State; Zip Code Sherman Oaks, CA 91403-4439	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowling, Patrick <hr/> Contributor address; City; State; Zip Code Sherman Oaks, CA 91403-4439	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drewsen, Joanne <hr/> Contributor address; City; State; Zip Code Camano Island, WA 98282-7634	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drimmer, Andrea <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20878-7409	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/828 Rpt: 195/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Droitcour, Judy <hr/> 6 Contributor address; City; State; Zip Code Oak Island, NC 28465-8441	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Cornelia <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48108-9666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Cornelia <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48108-9666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Cornelia <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48108-9666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunning, Elizabeth T. <hr/> Contributor address; City; State; Zip Code Austin, TX 78752-2476	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/828 Rpt: 196/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunning, Elizabeth T.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Austin, TX 78752-2476	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunning, Elizabeth T.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78752-2476	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunning, Elizabeth T.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78752-2476	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dupont, Jerry	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kaneohe, HI 96744-3743	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Wendy	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Chicago, IL 60614-4945	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/828 Rpt: 197/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Wendy <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60614-4945	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eagle, Steve <hr/> Contributor address; City; State; Zip Code Amherst, MA 01004-2041	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eagle, Steve <hr/> Contributor address; City; State; Zip Code Amherst, MA 01004-2041	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eagle, Steve <hr/> Contributor address; City; State; Zip Code Amherst, MA 01004-2041	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eagle, Steve <hr/> Contributor address; City; State; Zip Code Amherst, MA 01004-2041	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/828 Rpt: 198/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eagle, Steve <hr/> 6 Contributor address; City; State; Zip Code Amherst, MA 01004-2041	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/828 Rpt: 199/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> 6 Contributor address; City; State; Zip Code Crete, NE 68333-1747	7 Amount of Contribution (\$) \$17.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/828 Rpt: 200/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> 6 Contributor address; City; State; Zip Code Crete, NE 68333-1747	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/828 Rpt: 201/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> 6 Contributor address; City; State; Zip Code Crete, NE 68333-1747	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easton, Geoff <hr/> Contributor address; City; State; Zip Code Crete, NE 68333-1747	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebel, Jenny <hr/> Contributor address; City; State; Zip Code Oakland, CA 94619-2221	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/828 Rpt: 202/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebel, Jenny <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94619-2221	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebel, Jenny <hr/> Contributor address; City; State; Zip Code Oakland, CA 94619-2221	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebersohl, Kathleen <hr/> Contributor address; City; State; Zip Code Rougemont, NC 27572-6623	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckenrode, James <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85209-1431	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckenrode, James <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85209-1431	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/828 Rpt: 203/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckenrode, James <hr/> 6 Contributor address; City; State; Zip Code Mesa, AZ 85209-1431	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckenrode, James <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85209-1431	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgar, Cary <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85018-2300	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgar, Cary <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85018-2300	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgar, Cary <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85018-2300	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/828 Rpt: 204/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgar, Cary <hr/> 6 Contributor address; City; State; Zip Code Phoenix, AZ 85018-2300	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Anthony <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3213	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Anthony <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3213	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Anthony <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3213	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Anthony <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3213	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/828 Rpt: 205/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eldridge, Michael <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90066-4109	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eldridge, Michael <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-4109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eldridge, Michael <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-4109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eldridge, Michael <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-4109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eldridge, Michael <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-4109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/828 Rpt: 206/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E.	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Bellevue, WA 98009-3406		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Bellevue, WA 98009-3406		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E.	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Bellevue, WA 98009-3406		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E.	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Bellevue, WA 98009-3406		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E.	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code Bellevue, WA 98009-3406		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/828 Rpt: 207/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Bellevue, WA 98009-3406	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Bellevue, WA 98009-3406	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elenga, Sigrid E.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Bellevue, WA 98009-3406	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellefson, Kathryn	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fairmont, NC 28340-1208	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellefson, Kathryn	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Fairmont, NC 28340-1208	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/828 Rpt: 208/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellefson, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Fairmont, NC 28340-1208	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Dan <hr/> Contributor address; City; State; Zip Code Louisburg, NC 27549-2434	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Dan <hr/> Contributor address; City; State; Zip Code Louisburg, NC 27549-2434	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Dan <hr/> Contributor address; City; State; Zip Code Louisburg, NC 27549-2434	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Dan <hr/> Contributor address; City; State; Zip Code Louisburg, NC 27549-2434	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/828 Rpt: 209/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellsworth, Anne <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02138-4725	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellsworth, Anne <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138-4725	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enders, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10028-7535	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Painter		Employer (See Instructions) Self Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enders, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10028-7535	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Painter		Employer (See Instructions) Self Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enders, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10028-7535	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Painter		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/828 Rpt: 210/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enders, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10028-7535	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Painter		9 Employer (See Instructions) Self Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enders, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10028-7535	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Painter		Employer (See Instructions) Self Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enever, Charles <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80487-8828	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enever, Charles <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80487-8828	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enever, Charles <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80487-8828	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 207/828 Rpt: 211/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enever, Charles <hr/> 6 Contributor address; City; State; Zip Code Steamboat Springs, CO 80487-8828	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enever, Charles <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80487-8828	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enever, Charles <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80487-8828	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enever, Charles <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80487-8828	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enever, Charles <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80487-8828	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/828 Rpt: 212/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enever, Charles <hr/> 6 Contributor address; City; State; Zip Code Steamboat Springs, CO 80487-8828	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Eric <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-2050	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Lewis <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94901-3614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Lewis <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94901-3614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Lewis <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94901-3614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 209/828 Rpt: 213/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Lewis	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code San Rafael, CA 94901-3614		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engle, John	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Delray Beach, FL 33444-3762		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erdheim, Eric	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Gaithersburg, MD 20878-4597		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson Jr., Josiah	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Seattle, WA 98115-6943		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson Jr., Josiah	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Seattle, WA 98115-6943		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 210/828 Rpt: 214/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson Jr., Josiah <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98115-6943	7 Amount of Contribution (\$) \$85.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson Jr., Josiah <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115-6943	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson Jr., Josiah <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115-6943	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson Jr., Josiah <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115-6943	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson Jr., Josiah <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115-6943	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 211/828 Rpt: 215/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson Jr., Josiah <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98115-6943	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estrin, Richard <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95819-1933	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estrin, Richard <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95819-1933	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estrin, Richard <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95819-1933	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estrin, Richard <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95819-1933	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 212/828 Rpt: 216/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everts, John <hr/> 6 Contributor address; City; State; Zip Code Mill Valley, CA 94941-2016	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everts, John <hr/> Contributor address; City; State; Zip Code Mill Valley, CA 94941-2016	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabre, Vilma <hr/> Contributor address; City; State; Zip Code Louisville, KY 40204-2205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabre, Vilma <hr/> Contributor address; City; State; Zip Code Louisville, KY 40204-2205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabre, Vilma <hr/> Contributor address; City; State; Zip Code Louisville, KY 40204-2205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 213/828 Rpt: 217/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabre, Vilma <hr/> 6 Contributor address; City; State; Zip Code Louisville, KY 40204-2205	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabre, Vilma <hr/> Contributor address; City; State; Zip Code Louisville, KY 40204-2205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabre, Vilma <hr/> Contributor address; City; State; Zip Code Louisville, KY 40204-2205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabre, Vilma <hr/> Contributor address; City; State; Zip Code Louisville, KY 40204-2205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabre, Vilma <hr/> Contributor address; City; State; Zip Code Louisville, KY 40204-2205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 214/828 Rpt: 218/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, David <hr/> 6 Contributor address; City; State; Zip Code Louisville, CO 80027-9786	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, David <hr/> Contributor address; City; State; Zip Code Louisville, CO 80027-9786	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, David <hr/> Contributor address; City; State; Zip Code Louisville, CO 80027-9786	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, David <hr/> Contributor address; City; State; Zip Code Louisville, CO 80027-9786	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feeley, Susan <hr/> Contributor address; City; State; Zip Code Providence, RI 02907-3558	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 215/828 Rpt: 219/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feeley, Susan <hr/> 6 Contributor address; City; State; Zip Code Providence, RI 02907-3558	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feller, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10002-3929	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feller, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10002-3929	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feller, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10002-3929	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feller, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10002-3929	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 216/828 Rpt: 220/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felt, F. Chandler <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98115-5818	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felt, F. Chandler <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115-5818	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fessenden, Averil <hr/> Contributor address; City; State; Zip Code Brunswick, ME 04011-7743	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, Heidi <hr/> Contributor address; City; State; Zip Code Asheville, NC 28804-3520	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Files, Jennifer <hr/> Contributor address; City; State; Zip Code Reno, NV 89509-7028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 217/828 Rpt: 221/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Files, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Reno, NV 89509-7028	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Files, Jennifer <hr/> Contributor address; City; State; Zip Code Reno, NV 89509-7028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fimbres, Elizabeth <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85712-1239	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fimbres, Elizabeth <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85712-1239	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fimbres, Elizabeth <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85712-1239	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 218/828 Rpt: 222/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fimbres, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85712-1239	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fimbres, Elizabeth <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85712-1239	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fimbres, Elizabeth <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85712-1239	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fimbres, Elizabeth <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85712-1239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Lawrence <hr/> Contributor address; City; State; Zip Code West San Fransisco, CA 95816	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 219/828 Rpt: 223/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Lawrence <hr/> 6 Contributor address; City; State; Zip Code West San Fransisco, CA 95816	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Lawrence <hr/> Contributor address; City; State; Zip Code West San Fransisco, CA 95816	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Lawrence <hr/> Contributor address; City; State; Zip Code West San Fransisco, CA 95816	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Thomas <hr/> Contributor address; City; State; Zip Code Falls Village, CT 06031-1322	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Thomas <hr/> Contributor address; City; State; Zip Code Falls Village, CT 06031-1322	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 220/828 Rpt: 224/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fishman, Arnie <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90049-2808	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fishman, Judy <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90049-2808	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fishman, Judy <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90049-2808	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fishman, Judy <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90049-2808	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitz, Steven <hr/> Contributor address; City; State; Zip Code Douglasville, GA 30135-4836	Amount of Contribution (\$) \$28.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 221/828 Rpt: 225/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitz, Steven	7 Amount of Contribution (\$) \$28.00
6 Contributor address; City; State; Zip Code Douglasville, GA 30135-4836		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitz, Steven	Amount of Contribution (\$) \$28.00
Contributor address; City; State; Zip Code Douglasville, GA 30135-4836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitz, Steven	Amount of Contribution (\$) \$28.00
Contributor address; City; State; Zip Code Douglasville, GA 30135-4836		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, J. David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Nehalem, OR 97131-9858		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, J. David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Nehalem, OR 97131-9858		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 222/828 Rpt: 226/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, J. David <hr/> 6 Contributor address; City; State; Zip Code Nehalem, OR 97131-9858	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, J. David <hr/> Contributor address; City; State; Zip Code Nehalem, OR 97131-9858	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, J. David <hr/> Contributor address; City; State; Zip Code Nehalem, OR 97131-9858	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, Marilyn <hr/> Contributor address; City; State; Zip Code Nehalem, OR 97131-9858	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, Marilyn <hr/> Contributor address; City; State; Zip Code Nehalem, OR 97131-9858	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/828 Rpt: 227/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, Marilyn	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Nehalem, OR 97131-9858		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, Marilyn	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Nehalem, OR 97131-9858		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemming, Marilyn	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Nehalem, OR 97131-9858		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flickinger, Nancy	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Takoma Park, MD 20912-4403		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flickinger, Nancy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Takoma Park, MD 20912-4403		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 224/828 Rpt: 228/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Gale <hr/> 6 Contributor address; City; State; Zip Code Honolulu, HI 96816-4910	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Gale <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96816-4910	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Gale <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96816-4910	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fogarty, John <hr/> Contributor address; City; State; Zip Code Southampton, NY 11968	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fogel, Donna <hr/> Contributor address; City; State; Zip Code New York, NY 10040-4037	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/828 Rpt: 229/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fogel, Donna <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10040-4037	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fogel, Donna <hr/> Contributor address; City; State; Zip Code New York, NY 10040-4037	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fogel, Donna <hr/> Contributor address; City; State; Zip Code New York, NY 10040-4037	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fogel, Donna <hr/> Contributor address; City; State; Zip Code New York, NY 10040-4037	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Marsha <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30305-3714	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/828 Rpt: 230/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Marsha <hr/> 6 Contributor address; City; State; Zip Code Atlanta, GA 30305-3714	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foss, Gary <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-7622	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foss, Gary <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-7622	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foss, Gary <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-7622	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, John <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90068-2328	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/828 Rpt: 231/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foti, Melody <hr/> 6 Contributor address; City; State; Zip Code Northampton, MA 01060-1116	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions) Advisor		9 Employer (See Instructions) Wells Fargo and Company
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fouke, Scherry <hr/> Contributor address; City; State; Zip Code Morristown, TN 37814-3423	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fouke, Scherry <hr/> Contributor address; City; State; Zip Code Morristown, TN 37814-3423	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fouke, Scherry <hr/> Contributor address; City; State; Zip Code Morristown, TN 37814-3423	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fouke, Scherry <hr/> Contributor address; City; State; Zip Code Morristown, TN 37814-3423	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/828 Rpt: 232/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fouke, Scherry <hr/> 6 Contributor address; City; State; Zip Code Morristown, TN 37814-3423	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Michael <hr/> Contributor address; City; State; Zip Code Chicago, IL 60637-6778	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Michael <hr/> Contributor address; City; State; Zip Code Chicago, IL 60637-6778	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Michael <hr/> Contributor address; City; State; Zip Code Chicago, IL 60637-6778	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Michael <hr/> Contributor address; City; State; Zip Code Chicago, IL 60637-6778	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 229/828 Rpt: 233/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frampton, Robert <hr/> 6 Contributor address; City; State; Zip Code Pasadena, CA 91104-2966	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frampton, Robert <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104-2966	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frampton, Robert <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104-2966	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frampton, Robert <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104-2966	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frampton, Robert <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104-2966	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 230/828 Rpt: 234/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frampton, Robert <hr/> 6 Contributor address; City; State; Zip Code Pasadena, CA 91104-2966	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frampton, Robert <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91104-2966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francese, Evelyn <hr/> Contributor address; City; State; Zip Code Staten Island, NY 10312-3440	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francese, Evelyn <hr/> Contributor address; City; State; Zip Code Staten Island, NY 10312-3440	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francese, Evelyn <hr/> Contributor address; City; State; Zip Code Staten Island, NY 10312-3440	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/828 Rpt: 235/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francese, Evelyn <hr/> 6 Contributor address; City; State; Zip Code Staten Island, NY 10312-3440	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francese, Evelyn <hr/> Contributor address; City; State; Zip Code Staten Island, NY 10312-3440	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Debbie <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07042-3650	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Debbie <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07042-3650	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Debbie <hr/> Contributor address; City; State; Zip Code Montclair, NJ 07042-3650	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/828 Rpt: 236/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Debbie	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Montclair, NJ 07042-3650		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Debbie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Montclair, NJ 07042-3650		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankston, Bob	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code Newton, MA 02461-1210		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franzen, Mary R.	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Wahpeton, ND 58075-4139		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Jan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Las Vegas, NV 89130-3662		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/828 Rpt: 237/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Jan	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Las Vegas, NV 89130-3662		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freed, Kathryn	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10002-4380		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freed, Kathryn	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10002-4380		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freed, Kathryn	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10002-4380		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Carol	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Minneapolis, MN 55403-3187		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 234/828 Rpt: 238/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freidin, Ralph <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02210-3420	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freiman, David <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19103-4821	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freiman, David <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19103-4821	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Edward <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90035-2626	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritchie, Scott <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55417-2413	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 235/828 Rpt: 239/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fugate, Barbara <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20904-2907	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fugate, Barbara <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20904-2907	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fugate, Barbara <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20904-2907	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fugate, Barbara <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20904-2907	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuhrer, Gail <hr/> Contributor address; City; State; Zip Code Montague, MA 01351-9506	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 236/828 Rpt: 240/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuhrer, Gail <hr/> 6 Contributor address; City; State; Zip Code Montague, MA 01351-9506	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuhrer, Gail <hr/> Contributor address; City; State; Zip Code Montague, MA 01351-9506	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuhrer, Gail <hr/> Contributor address; City; State; Zip Code Montague, MA 01351-9506	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuhrer, Gail <hr/> Contributor address; City; State; Zip Code Montague, MA 01351-9506	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuhrer, Gail <hr/> Contributor address; City; State; Zip Code Montague, MA 01351-9506	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 237/828 Rpt: 241/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuhrer, Gail <hr/> 6 Contributor address; City; State; Zip Code Montague, MA 01351-9506	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuhrer, Gail <hr/> Contributor address; City; State; Zip Code Montague, MA 01351-9506	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulco, Adrienne <hr/> Contributor address; City; State; Zip Code Glastonbury, CT 06033-2505	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulco, Adrienne <hr/> Contributor address; City; State; Zip Code Glastonbury, CT 06033-2505	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulp, Carol <hr/> Contributor address; City; State; Zip Code Boston, MA 02116-3043	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 238/828 Rpt: 242/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulp, Carol <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02116-3043	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulp, Carol <hr/> Contributor address; City; State; Zip Code Boston, MA 02116-3043	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulp, Carol <hr/> Contributor address; City; State; Zip Code Boston, MA 02116-3043	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Linda <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22911-4637	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Linda <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22911-4637	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 239/828 Rpt: 243/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Linda <hr/> 6 Contributor address; City; State; Zip Code Charlottesville, VA 22911-4637	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Linda <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22911-4637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Linda <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22911-4637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Linda <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22911-4637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuson, Karen <hr/> Contributor address; City; State; Zip Code San Diego, CA 92131-1674	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 240/828 Rpt: 244/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuson, Karen <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92131-1674	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuson, Karen <hr/> Contributor address; City; State; Zip Code San Diego, CA 92131-1674	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Futa, Baryn <hr/> Contributor address; City; State; Zip Code Denver, CO 80206-4510	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaboury, Steve <hr/> Contributor address; City; State; Zip Code New York, NY 10007-1270	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamble, Jill <hr/> Contributor address; City; State; Zip Code New York, NY 10011-3909	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 241/828 Rpt: 245/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamble, Jill <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10011-3909	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamble, Jill <hr/> Contributor address; City; State; Zip Code New York, NY 10011-3909	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamble, Jill <hr/> Contributor address; City; State; Zip Code New York, NY 10011-3909	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamble, Jill <hr/> Contributor address; City; State; Zip Code New York, NY 10011-3909	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamble, Jill <hr/> Contributor address; City; State; Zip Code New York, NY 10011-3909	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 242/828 Rpt: 246/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamse, Roy <hr/> 6 Contributor address; City; State; Zip Code Arlington, VA 22207-1321	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamse, Roy <hr/> Contributor address; City; State; Zip Code Arlington, VA 22207-1321	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamse, Roy <hr/> Contributor address; City; State; Zip Code Arlington, VA 22207-1321	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamse, Roy <hr/> Contributor address; City; State; Zip Code Arlington, VA 22207-1321	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamse, Roy <hr/> Contributor address; City; State; Zip Code Arlington, VA 22207-1321	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 243/828 Rpt: 247/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Brian <hr/> 6 Contributor address; City; State; Zip Code Cary, NC 27519-8874	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Brian <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Brian <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Brian <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Brian <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 244/828 Rpt: 248/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Brian <hr/> 6 Contributor address; City; State; Zip Code Cary, NC 27519-8874	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Brian <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Brian <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Tammy <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Tammy <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 245/828 Rpt: 249/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Tammy <hr/> 6 Contributor address; City; State; Zip Code Cary, NC 27519-8874	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Tammy <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Tammy <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Tammy <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Tammy <hr/> Contributor address; City; State; Zip Code Cary, NC 27519-8874	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 246/828 Rpt: 250/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcelon, Ann	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code Chicago, IL 60615-2015		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Ricki	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code White Plains, NY 10605-1258		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garfield, Tom	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Fairhaven, MA 02719-3811		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garland, David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Minneapolis, MN 55407-2311		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garland, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Minneapolis, MN 55407-2311		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 247/828 Rpt: 251/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garland, David	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Minneapolis, MN 55407-2311		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garland, David	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Minneapolis, MN 55407-2311		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garland, David	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Minneapolis, MN 55407-2311		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gault, Richard	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Sanford, FL 32771-5426		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaylord, Robert	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Gowanda, NY 14070-1010		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 248/828 Rpt: 252/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaylord, Robert <hr/> 6 Contributor address; City; State; Zip Code Gowanda, NY 14070-1010	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaylord, Robert <hr/> Contributor address; City; State; Zip Code Gowanda, NY 14070-1010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaylord, Robert <hr/> Contributor address; City; State; Zip Code Gowanda, NY 14070-1010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gdisis, Deborah <hr/> Contributor address; City; State; Zip Code Wichita, KS 67212-5473	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gdisis, Deborah <hr/> Contributor address; City; State; Zip Code Wichita, KS 67212-5473	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 249/828 Rpt: 253/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gdisis, Deborah	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Wichita, KS 67212-5473		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gefter, Marcy	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Boston, MA 02116-3025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gefter, Marcy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Boston, MA 02116-3025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gefter, Marcy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Boston, MA 02116-3025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gefter, Marcy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Boston, MA 02116-3025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 250/828 Rpt: 254/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gelgisser, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Lake Forest Park, WA 98155-5421	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gelgisser, Jeffrey <hr/> Contributor address; City; State; Zip Code Lake Forest Park, WA 98155-5421	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Barbara <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64151-3745	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Barbara <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64151-3745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Bill <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85250-4816	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 251/828 Rpt: 255/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Bill <hr/> 6 Contributor address; City; State; Zip Code Scottsdale, AZ 85250-4816	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Bill <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85250-4816	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Bill <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85250-4816	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Bill <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85250-4816	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Bill <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85250-4816	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 252/828 Rpt: 256/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Bill <hr/> 6 Contributor address; City; State; Zip Code Scottsdale, AZ 85250-4816	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Donetta <hr/> Contributor address; City; State; Zip Code Washington, DC 20015-1629	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Antique Dealer		Employer (See Instructions) The Brass Knob Architectural Antiques
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Donetta <hr/> Contributor address; City; State; Zip Code Washington, DC 20015-1629	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Antique Dealer		Employer (See Instructions) The Brass Knob Architectural Antiques
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Donetta <hr/> Contributor address; City; State; Zip Code Washington, DC 20015-1629	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Antique Dealer		Employer (See Instructions) The Brass Knob Architectural Antiques
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Richard <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278-4131	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 253/828 Rpt: 257/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Richard <hr/> 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90278-4131	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Richard <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278-4131	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Richard <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278-4131	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Richard <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278-4131	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Richard <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90278-4131	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 254/828 Rpt: 258/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerould, Sarah <hr/> 6 Contributor address; City; State; Zip Code Medford, MA 02155-2928	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerould, Sarah <hr/> Contributor address; City; State; Zip Code Medford, MA 02155-2928	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghory, Ward <hr/> Contributor address; City; State; Zip Code East Orleans, MA 02643-0547	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghory, Ward <hr/> Contributor address; City; State; Zip Code East Orleans, MA 02643-0547	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghory, Ward <hr/> Contributor address; City; State; Zip Code East Orleans, MA 02643-0547	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 255/828 Rpt: 259/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghory, Ward <hr/> 6 Contributor address; City; State; Zip Code East Orleans, MA 02643-0547	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbons, Tracy <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94024-6252	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Sherry <hr/> Contributor address; City; State; Zip Code O Fallon, IL 62269-6680	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Sherry <hr/> Contributor address; City; State; Zip Code O Fallon, IL 62269-6680	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Sherry <hr/> Contributor address; City; State; Zip Code O Fallon, IL 62269-6680	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 256/828 Rpt: 260/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Sherry <hr/> 6 Contributor address; City; State; Zip Code O Fallon, IL 62269-6680	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Sherry <hr/> Contributor address; City; State; Zip Code O Fallon, IL 62269-6680	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Sherry <hr/> Contributor address; City; State; Zip Code O Fallon, IL 62269-6680	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Sherry <hr/> Contributor address; City; State; Zip Code O Fallon, IL 62269-6680	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Sherry <hr/> Contributor address; City; State; Zip Code O Fallon, IL 62269-6680	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 257/828 Rpt: 261/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giese, Filomena <hr/> 6 Contributor address; City; State; Zip Code Kensington, CA 94707-1321	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giese, Filomena <hr/> Contributor address; City; State; Zip Code Kensington, CA 94707-1321	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giese, Filomena <hr/> Contributor address; City; State; Zip Code Kensington, CA 94707-1321	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giese, Filomena <hr/> Contributor address; City; State; Zip Code Kensington, CA 94707-1321	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giese, Filomena <hr/> Contributor address; City; State; Zip Code Kensington, CA 94707-1321	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 258/828 Rpt: 262/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gignilliat, William <hr/> 6 Contributor address; City; State; Zip Code Greenville, SC 29609-5024	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Sarah <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6805	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giner, Jose <hr/> Contributor address; City; State; Zip Code Syracuse, NY 13210-2650	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giner, Jose <hr/> Contributor address; City; State; Zip Code Syracuse, NY 13210-2650	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giner, Jose <hr/> Contributor address; City; State; Zip Code Syracuse, NY 13210-2650	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 259/828 Rpt: 263/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giner, Jose <hr/> 6 Contributor address; City; State; Zip Code Syracuse, NY 13210-2650	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gipson, Deborah <hr/> Contributor address; City; State; Zip Code Montgomery, AL 36117-4319	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gipson, Deborah <hr/> Contributor address; City; State; Zip Code Montgomery, AL 36117-4319	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gipson, Deborah <hr/> Contributor address; City; State; Zip Code Montgomery, AL 36117-4319	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gipson, Deborah <hr/> Contributor address; City; State; Zip Code Montgomery, AL 36117-4319	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 260/828 Rpt: 264/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gipson, Deborah 6 Contributor address; City; State; Zip Code Montgomery, AL 36117-4319	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glanz, David Contributor address; City; State; Zip Code Highland Park, NJ 08904-2635	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasgow, Michael Contributor address; City; State; Zip Code Vestal, NY 13850-3915	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasgow, Michael Contributor address; City; State; Zip Code Vestal, NY 13850-3915	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gless, Janet Contributor address; City; State; Zip Code Oakland, CA 94602-2039	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 261/828 Rpt: 265/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gluckman, Casey	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Port Townsend, WA 98368-7705		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gluckman, Casey	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Port Townsend, WA 98368-7705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gluckman, Casey	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Port Townsend, WA 98368-7705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gluckman, Casey	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Port Townsend, WA 98368-7705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gluckman, Casey	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Port Townsend, WA 98368-7705		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 262/828 Rpt: 266/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gluckman, Casey <hr/> 6 Contributor address; City; State; Zip Code Port Townsend, WA 98368-7705	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gluckman, Casey <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368-7705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Stephen <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34238-5665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Stephen <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34238-5665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Stephen <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34238-5665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 263/828 Rpt: 267/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Go, Marilyn <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11201-4618	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Go, Marilyn <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-4618	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Bart <hr/> Contributor address; City; State; Zip Code Somerset, MA 02726-3205	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Bart <hr/> Contributor address; City; State; Zip Code Somerset, MA 02726-3205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Bart <hr/> Contributor address; City; State; Zip Code Somerset, MA 02726-3205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 264/828 Rpt: 268/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Bart	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Somerset, MA 02726-3205		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldblatt, Robert	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Los Angeles, CA 90064-2504		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldblatt, Robert	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Los Angeles, CA 90064-2504		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldblatt, Robert	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Los Angeles, CA 90064-2504		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldblatt, Robert	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Los Angeles, CA 90064-2504		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 265/828 Rpt: 269/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldblatt, Robert <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90064-2504	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldblatt, Robert <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90064-2504	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldblatt, Robert <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90064-2504	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldman, Douglas E <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94123-3833	Amount of Contribution (\$) \$12,500.00
Principal occupation / Job title (See Instructions) Software Publisher		Employer (See Instructions) Certain Inc.
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldman, Lisa M <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94123-3833	Amount of Contribution (\$) \$12,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 266/828 Rpt: 270/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldy, Jill <hr/> 6 Contributor address; City; State; Zip Code Wilmette, IL 60091-1544	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldy, Jill <hr/> Contributor address; City; State; Zip Code Wilmette, IL 60091-1544	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldy, Jill <hr/> Contributor address; City; State; Zip Code Wilmette, IL 60091-1544	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldy, Jill <hr/> Contributor address; City; State; Zip Code Wilmette, IL 60091-1544	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldy, Jill <hr/> Contributor address; City; State; Zip Code Wilmette, IL 60091-1544	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 267/828 Rpt: 271/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golub, Zola <hr/> 6 Contributor address; City; State; Zip Code Bronx, NY 10463-3350	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomer Bangel, Louise <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45236-3336	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomer Bangel, Louise <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45236-3336	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomer Bangel, Louise <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45236-3336	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomer Bangel, Louise <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45236-3336	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 268/828 Rpt: 272/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez-Sanchez, Elise <hr/> 6 Contributor address; City; State; Zip Code Madison, MS 39110-9301	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez-Sanchez, Elise <hr/> Contributor address; City; State; Zip Code Madison, MS 39110-9301	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooding III, Frederic <hr/> Contributor address; City; State; Zip Code Chevy Chase, MD 20815-4703	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Donald <hr/> Contributor address; City; State; Zip Code Bedford Hills, NY 10507-1704	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Elliot <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90405-3110	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 269/828 Rpt: 273/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, John <hr/> 6 Contributor address; City; State; Zip Code Port Townsend, WA 98368-5059	7 Amount of Contribution (\$) \$107.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, John <hr/> Contributor address; City; State; Zip Code Port Townsend, WA 98368-5059	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, William <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94024-3160	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, William <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94024-3160	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, William <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94024-3160	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 270/828 Rpt: 274/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, William <hr/> 6 Contributor address; City; State; Zip Code Los Altos, CA 94024-3160	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottlieb, Gordon <hr/> Contributor address; City; State; Zip Code Jamaica Plain, MA 02130-5237	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottlieb, Gordon <hr/> Contributor address; City; State; Zip Code Jamaica Plain, MA 02130-5237	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottlieb, Gordon <hr/> Contributor address; City; State; Zip Code Jamaica Plain, MA 02130-5237	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottlieb, Gordon <hr/> Contributor address; City; State; Zip Code Jamaica Plain, MA 02130-5237	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 271/828 Rpt: 275/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Governanti, Daniel <hr/> 6 Contributor address; City; State; Zip Code Ithaca, NY 14850-9267	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Governanti, Daniel <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-9267	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Governanti, Daniel <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-9267	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granahan, James <hr/> Contributor address; City; State; Zip Code Oakland, CA 94619-2237	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Kenneth E. <hr/> Contributor address; City; State; Zip Code Port Angeles, WA 98362-7238	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 272/828 Rpt: 276/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Richard <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78741-3246	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78741-3246	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78741-3246	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78741-3246	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mike <hr/> Contributor address; City; State; Zip Code Denver, CO 80211-4024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 273/828 Rpt: 277/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mike <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80211-4024	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mike <hr/> Contributor address; City; State; Zip Code Denver, CO 80211-4024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mike <hr/> Contributor address; City; State; Zip Code Denver, CO 80211-4024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mike <hr/> Contributor address; City; State; Zip Code Denver, CO 80211-4024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Paul <hr/> Contributor address; City; State; Zip Code Harvard, MA 01451-1417	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 274/828 Rpt: 278/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Zina	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Washington, DC 20008-5112		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Zina	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Washington, DC 20008-5112		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Zina	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Washington, DC 20008-5112		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Zina	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Washington, DC 20008-5112		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Zina	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Washington, DC 20008-5112		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 275/828 Rpt: 279/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenhut, Christopher <hr/> 6 Contributor address; City; State; Zip Code Colorado Springs, CO 80918-3121	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwell, Eric <hr/> Contributor address; City; State; Zip Code Richland, WA 99352-4142	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwell, Eric <hr/> Contributor address; City; State; Zip Code Richland, WA 99352-4142	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Loma <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85746-7200	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Loma <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85746-7200	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 276/828 Rpt: 280/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Loma <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85746-7200	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Loma <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85746-7200	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Loma <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85746-7200	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Loma <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85746-7200	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Loma <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85746-7200	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 277/828 Rpt: 281/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Loma <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85746-7200	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Steve <hr/> Contributor address; City; State; Zip Code Forestville, CA 95436-9101	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Steve <hr/> Contributor address; City; State; Zip Code Forestville, CA 95436-9101	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Steve <hr/> Contributor address; City; State; Zip Code Forestville, CA 95436-9101	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Steve <hr/> Contributor address; City; State; Zip Code Forestville, CA 95436-9101	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 278/828 Rpt: 282/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Steve <hr/> 6 Contributor address; City; State; Zip Code Forestville, CA 95436-9101	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Steve <hr/> Contributor address; City; State; Zip Code Forestville, CA 95436-9101	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Steve <hr/> Contributor address; City; State; Zip Code Forestville, CA 95436-9101	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grivetti, Bruce <hr/> Contributor address; City; State; Zip Code New York, NY 10003-9610	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossbard, Howard <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34231-5422	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 279/828 Rpt: 283/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossbard, Howard <hr/> 6 Contributor address; City; State; Zip Code Sarasota, FL 34231-5422	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossman, Peter <hr/> Contributor address; City; State; Zip Code Delray Beach, FL 33483-6829	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groundwater, Beth <hr/> Contributor address; City; State; Zip Code Breckenridge, CO 80424-6430	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 280/828 Rpt: 284/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 281/828 Rpt: 285/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> 6 Contributor address; City; State; Zip Code Hampton, VA 23664-2207	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 282/828 Rpt: 286/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 283/828 Rpt: 287/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Hampton, VA 23664-2207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 284/828 Rpt: 288/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> 6 Contributor address; City; State; Zip Code Hampton, VA 23664-2207	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> Contributor address; City; State; Zip Code Hampton, VA 23664-2207	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 285/828 Rpt: 289/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Eric <hr/> 6 Contributor address; City; State; Zip Code Hampton, VA 23664-2207	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruber, Frank <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90405-3717	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Antonio <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94133-1803	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulick, Sandy <hr/> Contributor address; City; State; Zip Code Louisville, KY 40222-6181	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guobis, Thomas <hr/> Contributor address; City; State; Zip Code Port Angeles, WA 98362-9122	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 286/828 Rpt: 290/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guobis, Thomas <hr/> 6 Contributor address; City; State; Zip Code Port Angeles, WA 98362-9122	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guobis, Thomas <hr/> Contributor address; City; State; Zip Code Port Angeles, WA 98362-9122	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guobis, Thomas <hr/> Contributor address; City; State; Zip Code Port Angeles, WA 98362-9122	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guobis, Thomas <hr/> Contributor address; City; State; Zip Code Port Angeles, WA 98362-9122	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guobis, Thomas <hr/> Contributor address; City; State; Zip Code Port Angeles, WA 98362-9122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 287/828 Rpt: 291/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guobis, Thomas <hr/> 6 Contributor address; City; State; Zip Code Port Angeles, WA 98362-9122	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guobis, Thomas <hr/> Contributor address; City; State; Zip Code Port Angeles, WA 98362-9122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gupta, Dave <hr/> Contributor address; City; State; Zip Code Okemos, MI 48864-5965	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustin, Cindy <hr/> Contributor address; City; State; Zip Code Harpwell, ME 04079-3782	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustin, Cindy <hr/> Contributor address; City; State; Zip Code Harpwell, ME 04079-3782	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 288/828 Rpt: 292/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guth, Sherman <hr/> 6 Contributor address; City; State; Zip Code Bloomington, IN 47401-6188	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Adolfo R. <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020-9138	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Adolfo R. <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020-9138	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 289/828 Rpt: 293/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> 6 Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 290/828 Rpt: 294/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> 6 Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 291/828 Rpt: 295/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> 6 Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 292/828 Rpt: 296/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadden, Cathy <hr/> 6 Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236-1763	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Christopher <hr/> Contributor address; City; State; Zip Code Albany, CA 94706-2298	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Christopher <hr/> Contributor address; City; State; Zip Code Albany, CA 94706-2298	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Christopher <hr/> Contributor address; City; State; Zip Code Albany, CA 94706-2298	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Christopher <hr/> Contributor address; City; State; Zip Code Albany, CA 94706-2298	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 293/828 Rpt: 297/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Christopher <hr/> 6 Contributor address; City; State; Zip Code Albany, CA 94706-2298	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hager, Thomas <hr/> Contributor address; City; State; Zip Code Columbus, OH 43206-2007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hager, Thomas <hr/> Contributor address; City; State; Zip Code Columbus, OH 43206-2007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hager, Thomas <hr/> Contributor address; City; State; Zip Code Columbus, OH 43206-2007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hager, Thomas <hr/> Contributor address; City; State; Zip Code Columbus, OH 43206-2007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 294/828 Rpt: 298/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Robert <hr/> 6 Contributor address; City; State; Zip Code Annandale, VA 22003-1161	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, John <hr/> Contributor address; City; State; Zip Code Easton, PA 18044-1760	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Nancy <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30306-3515	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Nancy <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30306-3515	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Nancy <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30306-3515	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 295/828 Rpt: 299/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, William <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77065-4765	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, William <hr/> Contributor address; City; State; Zip Code Houston, TX 77065-4765	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, William <hr/> Contributor address; City; State; Zip Code Houston, TX 77065-4765	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, William <hr/> Contributor address; City; State; Zip Code Houston, TX 77065-4765	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamlin, Linda <hr/> Contributor address; City; State; Zip Code Denver, CO 80202-1169	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 296/828 Rpt: 300/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handel, Stanley <hr/> 6 Contributor address; City; State; Zip Code Tulsa, OK 74136-9003	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handel, Stanley <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74136-9003	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handel, Stanley <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74136-9003	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handel, Stanley <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74136-9003	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanning, Barbara <hr/> Contributor address; City; State; Zip Code New York, NY 10025-7974	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 297/828 Rpt: 301/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanning, Barbara <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10025-7974	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanning, Barbara <hr/> Contributor address; City; State; Zip Code New York, NY 10025-7974	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Happy, Carolyn <hr/> Contributor address; City; State; Zip Code Bethlehem, CT 06751-1106	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, Ann <hr/> Contributor address; City; State; Zip Code Dexter, MI 48130	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, Ann <hr/> Contributor address; City; State; Zip Code Dexter, MI 48130	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 298/828 Rpt: 302/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> 6 Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 299/828 Rpt: 303/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> 6 Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy <hr/> Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 300/828 Rpt: 304/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harr, Cathy	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Greenbelt, MD 20770-7729		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Elizabeth	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Deerfield Beach, FL 33441-4361		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Elizabeth	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Deerfield Beach, FL 33441-4361		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Daniel	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Vienna, VA 22182-1440		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 301/828 Rpt: 305/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Guy <hr/> 6 Contributor address; City; State; Zip Code Palo Alto, CA 94301-2452	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Guy <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94301-2452	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Guy <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94301-2452	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Guy <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94301-2452	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Sally <hr/> Contributor address; City; State; Zip Code Haleiwa, HI 96712-1520	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 302/828 Rpt: 306/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Sally <hr/> 6 Contributor address; City; State; Zip Code Haleiwa, HI 96712-1520	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Sally <hr/> Contributor address; City; State; Zip Code Haleiwa, HI 96712-1520	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Sally <hr/> Contributor address; City; State; Zip Code Haleiwa, HI 96712-1520	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartwig, Charles <hr/> Contributor address; City; State; Zip Code Jonesboro, AR 72401-8974	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hassan, Abe <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94124-3152	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 303/828 Rpt: 307/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasty, Carl <hr/> 6 Contributor address; City; State; Zip Code Reno, NV 89511-9450	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasty, Carl <hr/> Contributor address; City; State; Zip Code Reno, NV 89511-9450	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasty, Carl <hr/> Contributor address; City; State; Zip Code Reno, NV 89511-9450	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasty, Carl <hr/> Contributor address; City; State; Zip Code Reno, NV 89511-9450	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasty, Carl <hr/> Contributor address; City; State; Zip Code Reno, NV 89511-9450	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 304/828 Rpt: 308/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasty, Carl <hr/> 6 Contributor address; City; State; Zip Code Reno, NV 89511-9450	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haught, William <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94110-5549	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haught, William <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94110-5549	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haupt, Paul <hr/> Contributor address; City; State; Zip Code Menominee, MI 49858-3307	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haupt, Paul <hr/> Contributor address; City; State; Zip Code Menominee, MI 49858-3307	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 305/828 Rpt: 309/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haydon, Meredith <hr/> 6 Contributor address; City; State; Zip Code Evanston, IL 60201-6405	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haydon, Meredith <hr/> Contributor address; City; State; Zip Code Evanston, IL 60201-6405	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazelett, Barbara <hr/> Contributor address; City; State; Zip Code Vienna, VA 22181-6149	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazlitt, Andrea <hr/> Contributor address; City; State; Zip Code Lake Jackson, TX 77566-4420	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Hannah <hr/> Contributor address; City; State; Zip Code Bryn Mawr, PA 19010-1779	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 306/828 Rpt: 310/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Kirk <hr/> 6 Contributor address; City; State; Zip Code Palm Springs, CA 92262-4911	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Kirk <hr/> Contributor address; City; State; Zip Code Palm Springs, CA 92262-4911	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Nancy R. <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55113-5202	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Nancy R. <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55113-5202	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Nancy R. <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55113-5202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 307/828 Rpt: 311/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 308/828 Rpt: 312/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Sherrill	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Alexandria, VA 22303-2524		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 309/828 Rpt: 313/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henig, Fran <hr/> 6 Contributor address; City; State; Zip Code Short Hills, NJ 07078-1624	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henig, Fran <hr/> Contributor address; City; State; Zip Code Short Hills, NJ 07078-1624	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903-4584	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Recording Artist		Employer (See Instructions) Self Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903-4584	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Recording Artist		Employer (See Instructions) Self Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903-4584	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Recording Artist		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 310/828 Rpt: 314/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> 6 Contributor address; City; State; Zip Code Charlottesville, VA 22903-4584	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Recording Artist		9 Employer (See Instructions) Self Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903-4584	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Recording Artist		Employer (See Instructions) Self Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903-4584	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Recording Artist		Employer (See Instructions) Self Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henrey, Edward <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215-2580	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henthorn, Paula <hr/> Contributor address; City; State; Zip Code Wyndmoor, PA 19038-8535	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 311/828 Rpt: 315/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Gabor <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10023-7017	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Gabor <hr/> Contributor address; City; State; Zip Code New York, NY 10023-7017	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Gabor <hr/> Contributor address; City; State; Zip Code New York, NY 10023-7017	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herriot-Hatfield, Jennie <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94127-2361	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzfeld, Judith <hr/> Contributor address; City; State; Zip Code Newton, MA 02460-2330	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 312/828 Rpt: 316/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> 6 Contributor address; City; State; Zip Code North East, PA 16428-3870	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> Contributor address; City; State; Zip Code North East, PA 16428-3870	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> Contributor address; City; State; Zip Code North East, PA 16428-3870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> Contributor address; City; State; Zip Code North East, PA 16428-3870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> Contributor address; City; State; Zip Code North East, PA 16428-3870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 313/828 Rpt: 317/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> 6 Contributor address; City; State; Zip Code North East, PA 16428-3870	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> Contributor address; City; State; Zip Code North East, PA 16428-3870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> Contributor address; City; State; Zip Code North East, PA 16428-3870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> Contributor address; City; State; Zip Code North East, PA 16428-3870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heun, Linda <hr/> Contributor address; City; State; Zip Code North East, PA 16428-3870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 314/828 Rpt: 318/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hewes, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Albuquerque, NM 87102-2604	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hibbs, Thomas <hr/> Contributor address; City; State; Zip Code Coxs Creek, KY 40013-5724	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickton, David <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15205-1719	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Judith <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330-9560	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Richard W. <hr/> Contributor address; City; State; Zip Code East Lansing, MI 48823-1949	Amount of Contribution (\$) \$800.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Michigan State University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 315/828 Rpt: 319/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Richard W.	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code East Lansing, MI 48823-1949	
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Michigan State University
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Victoria	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Washington, DC 20011-2870	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Victoria	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Washington, DC 20011-2870	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Victoria	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Washington, DC 20011-2870	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilson, Dwight	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Greenwich, CT 06831-4307	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 316/828 Rpt: 320/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinckley, Katherine <hr/> 6 Contributor address; City; State; Zip Code Sanibel, FL 33957-2029	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinckley, Katherine <hr/> Contributor address; City; State; Zip Code Sanibel, FL 33957-2029	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinckley, Katherine <hr/> Contributor address; City; State; Zip Code Sanibel, FL 33957-2029	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinckley, Katherine <hr/> Contributor address; City; State; Zip Code Sanibel, FL 33957-2029	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinckley, Katherine <hr/> Contributor address; City; State; Zip Code Sanibel, FL 33957-2029	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 317/828 Rpt: 321/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinckley, Katherine <hr/> 6 Contributor address; City; State; Zip Code Sanibel, FL 33957-2029	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinckley, Katherine <hr/> Contributor address; City; State; Zip Code Sanibel, FL 33957-2029	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hirsch, Sam <hr/> Contributor address; City; State; Zip Code Rockville, MD 20852-3365	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoagland, Grace <hr/> Contributor address; City; State; Zip Code Woodside, CA 94062-3607	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-4020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 318/828 Rpt: 322/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20901-4020	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-4020	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-4020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-4020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-4020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 319/828 Rpt: 323/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20901-4020	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-4020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901-4020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, David <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32960-5213	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, David <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32960-5213	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 320/828 Rpt: 324/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, David <hr/> 6 Contributor address; City; State; Zip Code Vero Beach, FL 32960-5213	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, David <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32960-5213	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Karen <hr/> Contributor address; City; State; Zip Code Phoenix, AZ 85021-7290	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Alan <hr/> Contributor address; City; State; Zip Code Rochester, MN 55902-3629	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Coralie <hr/> Contributor address; City; State; Zip Code Fair Haven, NJ 07704-3309	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 321/828 Rpt: 325/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hofstadter, Douglas <hr/> 6 Contributor address; City; State; Zip Code Bloomington, IN 47401-5018	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Indiana University
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Ann <hr/> Contributor address; City; State; Zip Code Half Moon Bay, CA 94019-1372	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Ann <hr/> Contributor address; City; State; Zip Code Half Moon Bay, CA 94019-1372	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Ann <hr/> Contributor address; City; State; Zip Code Half Moon Bay, CA 94019-1372	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollman, Jeffrey <hr/> Contributor address; City; State; Zip Code Cazenovia, NY 13035-9346	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 322/828 Rpt: 326/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollman, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Cazenovia, NY 13035-9346	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollman, Jeffrey <hr/> Contributor address; City; State; Zip Code Cazenovia, NY 13035-9346	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Henry <hr/> Contributor address; City; State; Zip Code Narberth, PA 19072-2404	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Henry <hr/> Contributor address; City; State; Zip Code Narberth, PA 19072-2404	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 323/828 Rpt: 327/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> 6 Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 324/828 Rpt: 328/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> 6 Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110-1656	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 325/828 Rpt: 329/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horvay, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Amherst, MA 01002-2666	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horvay, Elizabeth <hr/> Contributor address; City; State; Zip Code Amherst, MA 01002-2666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horvay, Elizabeth <hr/> Contributor address; City; State; Zip Code Amherst, MA 01002-2666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horvay, Elizabeth <hr/> Contributor address; City; State; Zip Code Amherst, MA 01002-2666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horwitz, Margot <hr/> Contributor address; City; State; Zip Code Bryn Mawr, PA 19010-1950	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 326/828 Rpt: 330/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 327/828 Rpt: 331/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 328/828 Rpt: 332/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins-Hart, Teresa <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27605-0262	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Pat <hr/> Contributor address; City; State; Zip Code Tracy, CA 95376-5363	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Pat <hr/> Contributor address; City; State; Zip Code Tracy, CA 95376-5363	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Pat <hr/> Contributor address; City; State; Zip Code Tracy, CA 95376-5363	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Pat <hr/> Contributor address; City; State; Zip Code Tracy, CA 95376-5363	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 329/828 Rpt: 333/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howells, Edgar <hr/> 6 Contributor address; City; State; Zip Code Okatie, SC 29909-4710	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howells, Edgar <hr/> Contributor address; City; State; Zip Code Okatie, SC 29909-4710	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howieson, Margaret N. <hr/> Contributor address; City; State; Zip Code Mission, KS 66202-4221	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howieson, Margaret N. <hr/> Contributor address; City; State; Zip Code Mission, KS 66202-4221	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howieson, Margaret N. <hr/> Contributor address; City; State; Zip Code Mission, KS 66202-4221	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 330/828 Rpt: 334/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howieson, Margaret N.	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Mission, KS 66202-4221		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howieson, Margaret N.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Mission, KS 66202-4221		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoy, Mary Ellen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Ann Arbor, MI 48103-2213		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoy, Mary Ellen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Ann Arbor, MI 48103-2213		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hruby, Karen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Rancho Cucamonga, CA 91737-1806		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 331/828 Rpt: 335/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hruby, Karen <hr/> 6 Contributor address; City; State; Zip Code Rancho Cucamonga, CA 91737-1806	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hruby, Karen <hr/> Contributor address; City; State; Zip Code Rancho Cucamonga, CA 91737-1806	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hruby, Karen <hr/> Contributor address; City; State; Zip Code Rancho Cucamonga, CA 91737-1806	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffman, Paul <hr/> Contributor address; City; State; Zip Code Woodbury, MN 55129-4296	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffman, Paul <hr/> Contributor address; City; State; Zip Code Woodbury, MN 55129-4296	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 332/828 Rpt: 336/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffman, Paul <hr/> 6 Contributor address; City; State; Zip Code Woodbury, MN 55129-4296	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffman, Paul <hr/> Contributor address; City; State; Zip Code Woodbury, MN 55129-4296	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Ann F. <hr/> Contributor address; City; State; Zip Code Columbus, OH 43221-4640	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Ann F. <hr/> Contributor address; City; State; Zip Code Columbus, OH 43221-4640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Carol <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92008-2924	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 333/828 Rpt: 337/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Carol <hr/> 6 Contributor address; City; State; Zip Code Carlsbad, CA 92008-2924	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hukins, Janice <hr/> Contributor address; City; State; Zip Code Spring Hill, TN 37174-3235	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hukins, Janice <hr/> Contributor address; City; State; Zip Code Spring Hill, TN 37174-3235	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulce, Thomas <hr/> Contributor address; City; State; Zip Code New York, NY 10036-1708	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Laluchien Productions Inc
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulce, Thomas <hr/> Contributor address; City; State; Zip Code New York, NY 10036-1708	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Laluchien Productions Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 334/828 Rpt: 338/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulce, Thomas <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10036-1708	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Actor		9 Employer (See Instructions) Laluchien Productions Inc
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulce, Thomas <hr/> Contributor address; City; State; Zip Code New York, NY 10036-1708	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Laluchien Productions Inc
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulce, Thomas <hr/> Contributor address; City; State; Zip Code New York, NY 10036-1708	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Laluchien Productions Inc
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulce, Thomas <hr/> Contributor address; City; State; Zip Code New York, NY 10036-1708	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Laluchien Productions Inc
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulce, Thomas <hr/> Contributor address; City; State; Zip Code New York, NY 10036-1708	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Laluchien Productions Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 335/828 Rpt: 339/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulce, Thomas <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10036-1708	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Actor		9 Employer (See Instructions) Laluchien Productions Inc
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Karl <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421-1843	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Karl <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421-1843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Karl <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421-1843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Karl <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421-1843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 336/828 Rpt: 340/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Karl <hr/> 6 Contributor address; City; State; Zip Code Chattanooga, TN 37421-1843	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huppe, Heather <hr/> Contributor address; City; State; Zip Code Midpines, CA 95345-9701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huppe, Heather <hr/> Contributor address; City; State; Zip Code Midpines, CA 95345-9701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurewitz, Carol <hr/> Contributor address; City; State; Zip Code New York, NY 10022-4136	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurewitz, Carol <hr/> Contributor address; City; State; Zip Code New York, NY 10022-4136	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 337/828 Rpt: 341/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchison, Nancy <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98117-3524	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchison, Nancy <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117-3524	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Illades, Jane <hr/> Contributor address; City; State; Zip Code San Diego, CA 92103-6243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Illades, Jane <hr/> Contributor address; City; State; Zip Code San Diego, CA 92103-6243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Illades, Jane <hr/> Contributor address; City; State; Zip Code San Diego, CA 92103-6243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 338/828 Rpt: 342/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Illades, Jane <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92103-6243	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inbody, Eric <hr/> Contributor address; City; State; Zip Code Skokie, IL 60077-4453	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inbody, Eric <hr/> Contributor address; City; State; Zip Code Skokie, IL 60077-4453	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inbody, Eric <hr/> Contributor address; City; State; Zip Code Skokie, IL 60077-4453	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inbody, Eric <hr/> Contributor address; City; State; Zip Code Skokie, IL 60077-4453	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 339/828 Rpt: 343/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inman, Debra <hr/> 6 Contributor address; City; State; Zip Code Napa, CA 94559-0444	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inman, Debra <hr/> Contributor address; City; State; Zip Code Napa, CA 94559-0444	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inman, Debra <hr/> Contributor address; City; State; Zip Code Napa, CA 94559-0444	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Intagliata, James <hr/> Contributor address; City; State; Zip Code Esteros, FL 33928-2969	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isaacs, John <hr/> Contributor address; City; State; Zip Code Carbondale, CO 81623-2005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 340/828 Rpt: 344/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isaacs, John <hr/> 6 Contributor address; City; State; Zip Code Carbondale, CO 81623-2005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isaacs, John <hr/> Contributor address; City; State; Zip Code Carbondale, CO 81623-2005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isaacs, John <hr/> Contributor address; City; State; Zip Code Carbondale, CO 81623-2005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isaacs, John <hr/> Contributor address; City; State; Zip Code Carbondale, CO 81623-2005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isaacs, John <hr/> Contributor address; City; State; Zip Code Carbondale, CO 81623-2005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 341/828 Rpt: 345/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isakson, Abigail <hr/> 6 Contributor address; City; State; Zip Code Flagstaff, AZ 86004-7265	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isakson, Abigail <hr/> Contributor address; City; State; Zip Code Flagstaff, AZ 86004-7265	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isakson, Abigail <hr/> Contributor address; City; State; Zip Code Flagstaff, AZ 86004-7265	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isakson, Abigail <hr/> Contributor address; City; State; Zip Code Flagstaff, AZ 86004-7265	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isakson, Abigail <hr/> Contributor address; City; State; Zip Code Flagstaff, AZ 86004-7265	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 342/828 Rpt: 346/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isakson, Abigail <hr/> 6 Contributor address; City; State; Zip Code Flagstaff, AZ 86004-7265	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isakson, Abigail <hr/> Contributor address; City; State; Zip Code Flagstaff, AZ 86004-7265	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isakson, Abigail <hr/> Contributor address; City; State; Zip Code Flagstaff, AZ 86004-7265	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isobel, Christina <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94110-5106	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isobel, Christina <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94110-5106	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 343/828 Rpt: 347/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isobel, Christina <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94110-5106	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isobel, Christina <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94110-5106	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itaya, Patricia W. <hr/> Contributor address; City; State; Zip Code Stockton, CA 95204-3021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itaya, Patricia W. <hr/> Contributor address; City; State; Zip Code Stockton, CA 95204-3021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itaya, Patricia W. <hr/> Contributor address; City; State; Zip Code Stockton, CA 95204-3021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 344/828 Rpt: 348/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itaya, Patricia W. <hr/> 6 Contributor address; City; State; Zip Code Stockton, CA 95204-3021	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itelson, Susan <hr/> Contributor address; City; State; Zip Code Davis, CA 95616-2607	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itelson, Susan <hr/> Contributor address; City; State; Zip Code Davis, CA 95616-2607	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivey, Keith <hr/> Contributor address; City; State; Zip Code Washington, DC 20008-4561	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jabal, Patrick <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6243	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 345/828 Rpt: 349/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Nancy <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10016-2557	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Nancy <hr/> Contributor address; City; State; Zip Code New York, NY 10016-2557	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Nancy <hr/> Contributor address; City; State; Zip Code New York, NY 10016-2557	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobsen, Rosanne <hr/> Contributor address; City; State; Zip Code Anchorage, AK 99515-1909	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobsen, Rosanne <hr/> Contributor address; City; State; Zip Code Anchorage, AK 99515-1909	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 346/828 Rpt: 350/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jakes, Mary C.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Waukegan, IL 60087-5044	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jakes, Mary C.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Waukegan, IL 60087-5044	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jakes, Mary C.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Waukegan, IL 60087-5044	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Danielle	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Los Altos, CA 94024-4137	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Danielle	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Los Altos, CA 94024-4137	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 347/828 Rpt: 351/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Scott <hr/> 6 Contributor address; City; State; Zip Code United Kingdom, DC 20000	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Scott <hr/> Contributor address; City; State; Zip Code United Kingdom, DC 20000	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Scott <hr/> Contributor address; City; State; Zip Code United Kingdom, DC 20000	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamison, Colleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-5323	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamison, Colleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-5323	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 348/828 Rpt: 352/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamison, Colleen	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Austin, TX 78731-5323		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamison, Colleen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78731-5323		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamison, Colleen	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78731-5323		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Waynesville, MO 65583-0590		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Waynesville, MO 65583-0590		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 349/828 Rpt: 353/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann <hr/> 6 Contributor address; City; State; Zip Code Waynesville, MO 65583-0590	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann <hr/> Contributor address; City; State; Zip Code Waynesville, MO 65583-0590	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann <hr/> Contributor address; City; State; Zip Code Waynesville, MO 65583-0590	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann <hr/> Contributor address; City; State; Zip Code Waynesville, MO 65583-0590	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann <hr/> Contributor address; City; State; Zip Code Waynesville, MO 65583-0590	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 350/828 Rpt: 354/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Waynesville, MO 65583-0590		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Waynesville, MO 65583-0590		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Waynesville, MO 65583-0590		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code Waynesville, MO 65583-0590		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrett, K. Ann	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code Waynesville, MO 65583-0590		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 351/828 Rpt: 355/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarvey, Paulette <hr/> 6 Contributor address; City; State; Zip Code Canby, OR 97013-9531	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarvey, Paulette <hr/> Contributor address; City; State; Zip Code Canby, OR 97013-9531	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarvis, Charlene <hr/> Contributor address; City; State; Zip Code Washington, DC 20012-1030	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarvis, Charlene <hr/> Contributor address; City; State; Zip Code Washington, DC 20012-1030	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarvis, Charlene <hr/> Contributor address; City; State; Zip Code Washington, DC 20012-1030	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 352/828 Rpt: 356/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Shirley	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Williamsburg, VA 23185-3187		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Shirley	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Williamsburg, VA 23185-3187		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Shirley	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Williamsburg, VA 23185-3187		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Shirley	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Williamsburg, VA 23185-3187		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Shirley	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Williamsburg, VA 23185-3187		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 353/828 Rpt: 357/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Shirley <hr/> 6 Contributor address; City; State; Zip Code Williamsburg, VA 23185-3187	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Bob <hr/> Contributor address; City; State; Zip Code Clayton, NC 27527-6744	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Matthew <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90405-2913	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Wendy J. <hr/> Contributor address; City; State; Zip Code Bloomington, IN 47401-4361	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Wendy J. <hr/> Contributor address; City; State; Zip Code Bloomington, IN 47401-4361	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 354/828 Rpt: 358/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Wendy J.	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Bloomington, IN 47401-4361	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Wendy J.	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Bloomington, IN 47401-4361	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerath, Ravinder	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Martinez, GA 30907-8931	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerath, Ravinder	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Martinez, GA 30907-8931	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerath, Ravinder	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Martinez, GA 30907-8931	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 355/828 Rpt: 359/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerath, Ravinder	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Martinez, GA 30907-8931		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerath, Ravinder	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Martinez, GA 30907-8931		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerath, Ravinder	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Martinez, GA 30907-8931		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeske, Paul	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Salem, OR 97306-9765		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Wanda	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Coppell, TX 75019-4157		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 356/828 Rpt: 360/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Deborah <hr/> 6 Contributor address; City; State; Zip Code Langley, WA 98260-9772	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gifford <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102-3241	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gifford <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102-3241	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gifford <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102-3241	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, John <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-1911	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 357/828 Rpt: 361/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, John <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90066-1911	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, John <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-1911	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, John <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-1911	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, John <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-1911	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, John <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-1911	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 358/828 Rpt: 362/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, John <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90066-1911	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, John <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066-1911	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laverne <hr/> Contributor address; City; State; Zip Code New York, NY 10019-6263	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laverne <hr/> Contributor address; City; State; Zip Code New York, NY 10019-6263	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laverne <hr/> Contributor address; City; State; Zip Code New York, NY 10019-6263	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 359/828 Rpt: 363/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laverne <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10019-6263	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Russell L. <hr/> Contributor address; City; State; Zip Code Pittsburg, KS 66762-6412	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Russell L. <hr/> Contributor address; City; State; Zip Code Pittsburg, KS 66762-6412	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Matthew <hr/> Contributor address; City; State; Zip Code Park City, UT 84098-5884	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Thomas <hr/> Contributor address; City; State; Zip Code Andover, MA 01810-6303	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 360/828 Rpt: 364/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jorgensen, Cathy <hr/> 6 Contributor address; City; State; Zip Code Loveland, CO 80538-1791	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jorgensen, Cathy <hr/> Contributor address; City; State; Zip Code Loveland, CO 80538-1791	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Journeay, Pat <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-4117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Journeay, Pat <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-4117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Journeay, Pat <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-4117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 361/828 Rpt: 365/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Journey, Pat <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056-4117	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Journey, Pat <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-4117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 362/828 Rpt: 366/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> 6 Contributor address; City; State; Zip Code Golden, CO 80403-0101	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 363/828 Rpt: 367/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> 6 Contributor address; City; State; Zip Code Golden, CO 80403-0101	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann <hr/> Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 364/828 Rpt: 368/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann 6 Contributor address; City; State; Zip Code Golden, CO 80403-0101	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurestovsky, Rosann Contributor address; City; State; Zip Code Golden, CO 80403-0101	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurist, Deborah Contributor address; City; State; Zip Code Groton, VT 05046-3529	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 365/828 Rpt: 369/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurist, Deborah <hr/> 6 Contributor address; City; State; Zip Code Groton, VT 05046-3529	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadzik, Peter <hr/> Contributor address; City; State; Zip Code Washington, DC 20009-4303	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kagel, John <hr/> Contributor address; City; State; Zip Code Columbus, OH 43220-4201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kagel, John <hr/> Contributor address; City; State; Zip Code Columbus, OH 43220-4201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kagel, John <hr/> Contributor address; City; State; Zip Code Columbus, OH 43220-4201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 366/828 Rpt: 370/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kagel, John	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Columbus, OH 43220-4201		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahrimanis, Tamara	Amount of Contribution (\$) \$3,500.00
Contributor address; City; State; Zip Code Green Valley, AZ 85622-4647		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahrimanis, Tamara	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Green Valley, AZ 85622-4647		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalick, Ted	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Chevy Chase, MD 20815-5243		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalick, Ted	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Chevy Chase, MD 20815-5243		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 367/828 Rpt: 371/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94612-4128	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 368/828 Rpt: 372/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S.	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code Oakland, CA 94612-4128		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S.	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code Oakland, CA 94612-4128		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S.	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code Oakland, CA 94612-4128		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oakland, CA 94612-4128		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oakland, CA 94612-4128		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 369/828 Rpt: 373/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94612-4128	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 370/828 Rpt: 374/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94612-4128	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> Contributor address; City; State; Zip Code Oakland, CA 94612-4128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 371/828 Rpt: 375/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kallenberg, Paula S. <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94612-4128	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaltreider II, D. Frank <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21042-1763	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaltreider II, D. Frank <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21042-1763	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaltreider II, D. Frank <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21042-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaltreider II, D. Frank <hr/> Contributor address; City; State; Zip Code Ellicott City, MD 21042-1763	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 372/828 Rpt: 376/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaltreider II, D. Frank <hr/> 6 Contributor address; City; State; Zip Code Ellicott City, MD 21042-1763	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kant, Elaine <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-1236	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kant, Elaine <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-1236	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaplan, Gayle <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55436-1749	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaplan, Gayle <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55436-1749	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 373/828 Rpt: 377/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaplan, Gayle <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55436-1749	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaplowitz, Stan <hr/> Contributor address; City; State; Zip Code East Lansing, MI 48823-3278	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasper, Daniel <hr/> Contributor address; City; State; Zip Code W Stockbridge, MA 01266-0111	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasper, Daniel <hr/> Contributor address; City; State; Zip Code W Stockbridge, MA 01266-0111	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katz, Jonathan <hr/> Contributor address; City; State; Zip Code New York, NY 10023-4902	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 374/828 Rpt: 378/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katz, Jonathan <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10023-4902	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katzoff, James <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33019-4629	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katzoff, James <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33019-4629	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katzoff, James <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33019-4629	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katzoff, James <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33019-4629	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 375/828 Rpt: 379/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Paul <hr/> 6 Contributor address; City; State; Zip Code Chatsworth, CA 91311-1901	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Paul <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-1901	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Paul <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-1901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Paul <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-1901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Paul <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-1901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 376/828 Rpt: 380/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Paul <hr/> 6 Contributor address; City; State; Zip Code Chatsworth, CA 91311-1901	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kay, Ann <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27514-6731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keasler, Carol <hr/> Contributor address; City; State; Zip Code Junction, IL 62954-2106	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenan, Elizabeth <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22042-2061	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenan, Elizabeth <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22042-2061	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 377/828 Rpt: 381/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenan, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Falls Church, VA 22042-2061	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenan, Elizabeth <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22042-2061	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenan, Elizabeth <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22042-2061	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenan, Elizabeth <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22042-2061	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Jocelyn <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91107-5304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 378/828 Rpt: 382/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Jocelyn <hr/> 6 Contributor address; City; State; Zip Code Pasadena, CA 91107-5304	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Jocelyn <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91107-5304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Jocelyn <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91107-5304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Jocelyn <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91107-5304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Jocelyn <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91107-5304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 379/828 Rpt: 383/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenum, Ana <hr/> 6 Contributor address; City; State; Zip Code Lacey, WA 98503-5535	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenum, Ana <hr/> Contributor address; City; State; Zip Code Lacey, WA 98503-5535	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiter, Lynne <hr/> Contributor address; City; State; Zip Code Boca Raton, FL 33486-5631	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiter, Lynne <hr/> Contributor address; City; State; Zip Code Boca Raton, FL 33486-5631	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Tom <hr/> Contributor address; City; State; Zip Code Portland, OR 97210-3366	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 380/828 Rpt: 384/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Tom <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97210-3366	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Tom <hr/> Contributor address; City; State; Zip Code Portland, OR 97210-3366	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kellner, Peter <hr/> Contributor address; City; State; Zip Code Nantucket, MA 02554-2404	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Maureen L. <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-9419	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Maureen L. <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-9419	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 381/828 Rpt: 385/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Maureen L. <hr/> 6 Contributor address; City; State; Zip Code Chapel Hill, NC 27517-9419	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Maureen L. <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-9419	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Carol <hr/> Contributor address; City; State; Zip Code Sunnyvale, CA 94087-2261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Carol <hr/> Contributor address; City; State; Zip Code Sunnyvale, CA 94087-2261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Carol <hr/> Contributor address; City; State; Zip Code Sunnyvale, CA 94087-2261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 382/828 Rpt: 386/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Carol	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Sunnyvale, CA 94087-2261		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Carol	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Sunnyvale, CA 94087-2261		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Sunnyvale, CA 94087-2261		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Sunnyvale, CA 94087-2261		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Sunnyvale, CA 94087-2261		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 383/828 Rpt: 387/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Carol <hr/> 6 Contributor address; City; State; Zip Code Sunnyvale, CA 94087-2261	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenney, Terrance <hr/> Contributor address; City; State; Zip Code Brocton, NY 14716-9761	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent, Arthur <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20905-5939	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilthau, Robert <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98310-4719	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilthau, Robert <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98310-4719	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 384/828 Rpt: 388/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilthau, Robert <hr/> 6 Contributor address; City; State; Zip Code Bremerton, WA 98310-4719	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilthau, Robert <hr/> Contributor address; City; State; Zip Code Bremerton, WA 98310-4719	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 385/828 Rpt: 389/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> 6 Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 386/828 Rpt: 390/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> 6 Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 387/828 Rpt: 391/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia 6 Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patricia Contributor address; City; State; Zip Code Sacramento, CA 95835-2053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Timothy Contributor address; City; State; Zip Code Scarsdale, NY 10583-2915	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 388/828 Rpt: 392/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> 6 Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 389/828 Rpt: 393/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> 6 Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 390/828 Rpt: 394/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinkead, Jordan <hr/> 6 Contributor address; City; State; Zip Code Kentfield, CA 94904-1510	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaird, Douglas W. <hr/> Contributor address; City; State; Zip Code Portland, OR 97219-7655	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaird, Douglas W. <hr/> Contributor address; City; State; Zip Code Portland, OR 97219-7655	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaman, Sydney <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3926	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaman, Sydney <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3926	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 391/828 Rpt: 395/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaman, Sydney <hr/> 6 Contributor address; City; State; Zip Code Eugene, OR 97405-3926	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaman, Sydney <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3926	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaman, Sydney <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3926	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaman, Sydney <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3926	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaman, Sydney <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-3926	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 392/828 Rpt: 396/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnaman, Sydney <hr/> 6 Contributor address; City; State; Zip Code Eugene, OR 97405-3926	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinzler, James <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586-4615	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinzler, James <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586-4615	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Deborah <hr/> Contributor address; City; State; Zip Code Ledyard, CT 06339-1503	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Deborah <hr/> Contributor address; City; State; Zip Code Ledyard, CT 06339-1503	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 393/828 Rpt: 397/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Deborah <hr/> 6 Contributor address; City; State; Zip Code Ledyard, CT 06339-1503	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Deborah <hr/> Contributor address; City; State; Zip Code Ledyard, CT 06339-1503	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirshner, Lewis <hr/> Contributor address; City; State; Zip Code Waterford, VT 05819-9303	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirshner, Lewis <hr/> Contributor address; City; State; Zip Code Waterford, VT 05819-9303	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirshner, Lewis <hr/> Contributor address; City; State; Zip Code Waterford, VT 05819-9303	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 394/828 Rpt: 398/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirshner, Lewis <hr/> 6 Contributor address; City; State; Zip Code Waterford, VT 05819-9303	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirshner, Lewis <hr/> Contributor address; City; State; Zip Code Waterford, VT 05819-9303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirshner, Lewis <hr/> Contributor address; City; State; Zip Code Waterford, VT 05819-9303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirshner, Lewis <hr/> Contributor address; City; State; Zip Code Waterford, VT 05819-9303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirtman, Bernard <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93110-2006	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 395/828 Rpt: 399/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirtman, Bernard <hr/> 6 Contributor address; City; State; Zip Code Santa Barbara, CA 93110-2006	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirtman, Bernard <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93110-2006	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirtman, Bernard <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93110-2006	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirtman, Bernard <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93110-2006	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirtman, Bernard <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93110-2006	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 396/828 Rpt: 400/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirtman, Bernard	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Santa Barbara, CA 93110-2006		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cos Cob, CT 06807		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cos Cob, CT 06807		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cos Cob, CT 06807		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Cos Cob, CT 06807		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 397/828 Rpt: 401/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> 6 Contributor address; City; State; Zip Code Cos Cob, CT 06807	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 398/828 Rpt: 402/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Cos Cob, CT 06807		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Cos Cob, CT 06807		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Cos Cob, CT 06807		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Cos Cob, CT 06807		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Cos Cob, CT 06807		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 399/828 Rpt: 403/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> 6 Contributor address; City; State; Zip Code Cos Cob, CT 06807	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 400/828 Rpt: 404/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> 6 Contributor address; City; State; Zip Code Cos Cob, CT 06807	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaassen, Ron <hr/> Contributor address; City; State; Zip Code Cos Cob, CT 06807	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleeman, Jan <hr/> Contributor address; City; State; Zip Code Salisbury, CT 06068-7701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 401/828 Rpt: 405/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleeman, Jan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Salisbury, CT 06068-7701		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleeman, Jan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Salisbury, CT 06068-7701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleeman, Jan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Salisbury, CT 06068-7701		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleiner, Judith	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10022-6534		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleiner, Judith	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10022-6534		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 402/828 Rpt: 406/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleiner, Judith <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10022-6534	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleiner, Judith <hr/> Contributor address; City; State; Zip Code New York, NY 10022-6534	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klepeis, Elizabeth <hr/> Contributor address; City; State; Zip Code Reading, MA 01867-1652	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klepeis, Elizabeth <hr/> Contributor address; City; State; Zip Code Reading, MA 01867-1652	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knoche, Thomas <hr/> Contributor address; City; State; Zip Code Haddon Township, NJ 08108-2337	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 403/828 Rpt: 407/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knoche, Thomas <hr/> 6 Contributor address; City; State; Zip Code Haddon Township, NJ 08108-2337	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 404/828 Rpt: 408/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27715-2152	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Duke University
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 405/828 Rpt: 409/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27715-2152	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Duke University
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koeberl, Dwight <hr/> Contributor address; City; State; Zip Code Durham, NC 27715-2152	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke University
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kohl, Victor <hr/> Contributor address; City; State; Zip Code Washington, DC 20007-3051	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kohl, Victor <hr/> Contributor address; City; State; Zip Code Washington, DC 20007-3051	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 406/828 Rpt: 410/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Komins, Ina <hr/> 6 Contributor address; City; State; Zip Code North Hollywood, CA 91601-4261	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koppel, Tracy F. <hr/> Contributor address; City; State; Zip Code Chicago, IL 60615-5138	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreher, Mark <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90405-3525	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreher, Mark <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90405-3525	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreher, Mark <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90405-3525	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 407/828 Rpt: 411/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreher, Mark <hr/> 6 Contributor address; City; State; Zip Code Santa Monica, CA 90405-3525	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krout, Seymour <hr/> Contributor address; City; State; Zip Code Saint Louis, MO 63131-2905	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krout, Seymour <hr/> Contributor address; City; State; Zip Code Saint Louis, MO 63131-2905	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krupp, George <hr/> Contributor address; City; State; Zip Code Chestnut Hill, MA 02467-1030	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruse, Mark <hr/> Contributor address; City; State; Zip Code Zirconia, NC 28790-6795	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 408/828 Rpt: 412/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruse, Mark <hr/> 6 Contributor address; City; State; Zip Code Zirconia, NC 28790-6795	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruse, Mark <hr/> Contributor address; City; State; Zip Code Zirconia, NC 28790-6795	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruse, Mark <hr/> Contributor address; City; State; Zip Code Zirconia, NC 28790-6795	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruse, Mark <hr/> Contributor address; City; State; Zip Code Zirconia, NC 28790-6795	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruse, Mark <hr/> Contributor address; City; State; Zip Code Zirconia, NC 28790-6795	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 409/828 Rpt: 413/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubo, Joyce <hr/> 6 Contributor address; City; State; Zip Code Fountain Valley, CA 92708-6827	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubo, Joyce <hr/> Contributor address; City; State; Zip Code Fountain Valley, CA 92708-6827	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubo, Joyce <hr/> Contributor address; City; State; Zip Code Fountain Valley, CA 92708-6827	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubo, Joyce <hr/> Contributor address; City; State; Zip Code Fountain Valley, CA 92708-6827	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Nathaniel <hr/> Contributor address; City; State; Zip Code Belmont, MA 02478-3006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 410/828 Rpt: 414/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Nathaniel <hr/> 6 Contributor address; City; State; Zip Code Belmont, MA 02478-3006	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Nathaniel <hr/> Contributor address; City; State; Zip Code Belmont, MA 02478-3006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulczycki, Stephen <hr/> Contributor address; City; State; Zip Code Studio City, CA 91604-1530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulczycki, Stephen <hr/> Contributor address; City; State; Zip Code Studio City, CA 91604-1530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulczycki, Stephen <hr/> Contributor address; City; State; Zip Code Studio City, CA 91604-1530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 411/828 Rpt: 415/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulczycki, Stephen 6 Contributor address; City; State; Zip Code Studio City, CA 91604-1530	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulczycki, Stephen Contributor address; City; State; Zip Code Studio City, CA 91604-1530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulczycki, Stephen Contributor address; City; State; Zip Code Studio City, CA 91604-1530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulczycki, Stephen Contributor address; City; State; Zip Code Studio City, CA 91604-1530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kunitani, Penny Contributor address; City; State; Zip Code Los Angeles, CA 90039-3027	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 412/828 Rpt: 416/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutilek, Michael <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95112-2368	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutilek, Michael <hr/> Contributor address; City; State; Zip Code San Jose, CA 95112-2368	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutilek, Michael <hr/> Contributor address; City; State; Zip Code San Jose, CA 95112-2368	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutilek, Michael <hr/> Contributor address; City; State; Zip Code San Jose, CA 95112-2368	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutilek, Michael <hr/> Contributor address; City; State; Zip Code San Jose, CA 95112-2368	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 413/828 Rpt: 417/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lai, David <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60629-4825	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lai, David <hr/> Contributor address; City; State; Zip Code Chicago, IL 60629-4825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lai, David <hr/> Contributor address; City; State; Zip Code Chicago, IL 60629-4825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lai, David <hr/> Contributor address; City; State; Zip Code Chicago, IL 60629-4825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lakota, Craig <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-1140	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 414/828 Rpt: 418/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lakota, Craig <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79912-1140	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lakota, Craig <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912-1140	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamers, Jeanette <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248-1930	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamm, Steven <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-3720	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamm, Steven <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-3720	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 415/828 Rpt: 419/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamm, Steven <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20016-3720	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamm, Steven <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-3720	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau, Susan <hr/> Contributor address; City; State; Zip Code Amherst, MA 01002-2527	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Tufts University
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lander, Gregory <hr/> Contributor address; City; State; Zip Code Peabody, MA 01960-3635	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lander, Gregory <hr/> Contributor address; City; State; Zip Code Peabody, MA 01960-3635	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 416/828 Rpt: 420/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lander, Gregory <hr/> 6 Contributor address; City; State; Zip Code Peabody, MA 01960-3635	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lander, Gregory <hr/> Contributor address; City; State; Zip Code Peabody, MA 01960-3635	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, John <hr/> Contributor address; City; State; Zip Code Voorhees, NJ 08043-4327	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langthorn, Jacob <hr/> Contributor address; City; State; Zip Code Arcadia, OK 73007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langthorn, Jacob <hr/> Contributor address; City; State; Zip Code Arcadia, OK 73007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 417/828 Rpt: 421/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langthorn, Jacob <hr/> 6 Contributor address; City; State; Zip Code Arcadia, OK 73007	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lappin, Richard <hr/> Contributor address; City; State; Zip Code Newton, MA 02459-3300	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Jeff <hr/> Contributor address; City; State; Zip Code Arlington Heights, IL 60005-1440	Amount of Contribution (\$) \$299.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laster, Dorothea <hr/> Contributor address; City; State; Zip Code Corinth, TX 76210-2647	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laster, Dorothea <hr/> Contributor address; City; State; Zip Code Corinth, TX 76210-2647	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 418/828 Rpt: 422/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laster, Dorothea <hr/> 6 Contributor address; City; State; Zip Code Corinth, TX 76210-2647	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latane, Bibb <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-2923	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latane, Bibb <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-2923	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latane, Bibb <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-2923	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latane, Bibb <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-2923	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 419/828 Rpt: 423/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauriat, Alison <hr/> 6 Contributor address; City; State; Zip Code Waltham, MA 02452-8802	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauriat, Alison <hr/> Contributor address; City; State; Zip Code Waltham, MA 02452-8802	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazarus, Bruce <hr/> Contributor address; City; State; Zip Code West Palm Beach, FL 33411-1822	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazarus, Laura <hr/> Contributor address; City; State; Zip Code West Palm Beach, FL 33411-1822	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le Renard, Jean-Louis <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90049-4224	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 420/828 Rpt: 424/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le Renard, Jean-Louis <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90049-4224	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leaf, Wilbur <hr/> Contributor address; City; State; Zip Code Shoemakersville, PA 19555-9018	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leaf, Wilbur <hr/> Contributor address; City; State; Zip Code Shoemakersville, PA 19555-9018	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leaf, Wilbur <hr/> Contributor address; City; State; Zip Code Shoemakersville, PA 19555-9018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leahy, Michael <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-3359	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 421/828 Rpt: 425/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leahy, Michael <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11201-3359	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leahy, Michael <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-3359	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leahy, Michael <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-3359	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Barbara <hr/> Contributor address; City; State; Zip Code Coloma, CA 95613-0266	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Barbara <hr/> Contributor address; City; State; Zip Code Coloma, CA 95613-0266	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 422/828 Rpt: 426/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Barbara <hr/> 6 Contributor address; City; State; Zip Code Coloma, CA 95613-0266	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Brandon <hr/> Contributor address; City; State; Zip Code New York, NY 11102	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Brandon <hr/> Contributor address; City; State; Zip Code New York, NY 11102	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Brandon <hr/> Contributor address; City; State; Zip Code New York, NY 11102	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee III, Dan H. <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-3311	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 423/828 Rpt: 427/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee III, Dan H.	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75209-3311	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Brad	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Madison, WI 53711-1653	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Brad	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Madison, WI 53711-1653	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Brad	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Madison, WI 53711-1653	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Brad	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Madison, WI 53711-1653	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 424/828 Rpt: 428/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leeper, Miki <hr/> 6 Contributor address; City; State; Zip Code Winchester, VA 22603-3883	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leeper, Miki <hr/> Contributor address; City; State; Zip Code Winchester, VA 22603-3883	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leeper, Miki <hr/> Contributor address; City; State; Zip Code Winchester, VA 22603-3883	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemieux, Amy <hr/> Contributor address; City; State; Zip Code Inver Grove Heights, MN 55077-3000	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Preschool Director		Employer (See Instructions) All Seasons Preschool
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemle, Russell <hr/> Contributor address; City; State; Zip Code Mill Valley, CA 94941-5081	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 425/828 Rpt: 429/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, Joyce <hr/> 6 Contributor address; City; State; Zip Code Ithaca, NY 14850-9505	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, Joyce <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-9505	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leslie, Joyce <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-9505	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levine, Karen <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-3359	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levine, Karen <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-3359	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 426/828 Rpt: 430/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levine, Karen <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11201-3359	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levine, Karen <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201-3359	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Alex <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122-3101	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Yelp
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Alex <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122-3101	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Yelp
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Jonathan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92119-3014	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 427/828 Rpt: 431/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Leslie <hr/> 6 Contributor address; City; State; Zip Code Westfield, NJ 07090-4002	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Leslie <hr/> Contributor address; City; State; Zip Code Westfield, NJ 07090-4002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Leslie <hr/> Contributor address; City; State; Zip Code Westfield, NJ 07090-4002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Leslie <hr/> Contributor address; City; State; Zip Code Westfield, NJ 07090-4002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Leslie <hr/> Contributor address; City; State; Zip Code Westfield, NJ 07090-4002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 428/828 Rpt: 432/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Leslie <hr/> 6 Contributor address; City; State; Zip Code Westfield, NJ 07090-4002	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Leslie <hr/> Contributor address; City; State; Zip Code Westfield, NJ 07090-4002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Mimi <hr/> Contributor address; City; State; Zip Code Nicasio, CA 94946-9703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Mimi <hr/> Contributor address; City; State; Zip Code Nicasio, CA 94946-9703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Mimi <hr/> Contributor address; City; State; Zip Code Nicasio, CA 94946-9703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 429/828 Rpt: 433/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Mimi <hr/> 6 Contributor address; City; State; Zip Code Nicasio, CA 94946-9703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Mimi <hr/> Contributor address; City; State; Zip Code Nicasio, CA 94946-9703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Mimi <hr/> Contributor address; City; State; Zip Code Nicasio, CA 94946-9703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Mimi <hr/> Contributor address; City; State; Zip Code Nicasio, CA 94946-9703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Mimi <hr/> Contributor address; City; State; Zip Code Nicasio, CA 94946-9703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 430/828 Rpt: 434/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Mimi <hr/> 6 Contributor address; City; State; Zip Code Nicasio, CA 94946-9703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Stephen <hr/> Contributor address; City; State; Zip Code Madison, WI 53711-1912	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Nordic Global
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Stephen <hr/> Contributor address; City; State; Zip Code Madison, WI 53711-1912	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Nordic Global
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Stephen <hr/> Contributor address; City; State; Zip Code Madison, WI 53711-1912	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Nordic Global
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Stephen <hr/> Contributor address; City; State; Zip Code Madison, WI 53711-1912	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Nordic Global

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 431/828 Rpt: 435/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ley, Bryson <hr/> 6 Contributor address; City; State; Zip Code Asheville, NC 28803-2073	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ley, Bryson <hr/> Contributor address; City; State; Zip Code Asheville, NC 28803-2073	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ley, Bryson <hr/> Contributor address; City; State; Zip Code Asheville, NC 28803-2073	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ley, Bryson <hr/> Contributor address; City; State; Zip Code Asheville, NC 28803-2073	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lichstein, Maja <hr/> Contributor address; City; State; Zip Code Santa Clara, CA 95051-2416	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 432/828 Rpt: 436/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lichtin, Ben	7 Amount of Contribution (\$) \$300.00
6 Contributor address; City; State; Zip Code Rochester, NY 14607-3805		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lichtin, Ben	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Rochester, NY 14607-3805		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lichtin, Ben	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Rochester, NY 14607-3805		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lichtin, Ben	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Rochester, NY 14607-3805		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lichtin, Ben	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Rochester, NY 14607-3805		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 433/828 Rpt: 437/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieberman, Leslie <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20009-4020	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieberman, Leslie <hr/> Contributor address; City; State; Zip Code Washington, DC 20009-4020	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieberman, Leslie <hr/> Contributor address; City; State; Zip Code Washington, DC 20009-4020	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieberkind, Julia <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22046-2906	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieberkind, Julia <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22046-2906	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 434/828 Rpt: 438/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liebeskind, Julia <hr/> 6 Contributor address; City; State; Zip Code Falls Church, VA 22046-2906	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liebeskind, Julia <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22046-2906	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liebman, Thomas <hr/> Contributor address; City; State; Zip Code Lake Barrington, IL 60010-7021	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liebman, Thomas <hr/> Contributor address; City; State; Zip Code Lake Barrington, IL 60010-7021	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Light, John <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201-4790	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 435/828 Rpt: 439/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Light, John <hr/> 6 Contributor address; City; State; Zip Code Arlington, VA 22201-4790	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Light, John <hr/> Contributor address; City; State; Zip Code Arlington, VA 22201-4790	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisoni, Katherine <hr/> Contributor address; City; State; Zip Code South Bend, IN 46615-1011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisoni, Katherine <hr/> Contributor address; City; State; Zip Code South Bend, IN 46615-1011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisoni, Katherine <hr/> Contributor address; City; State; Zip Code South Bend, IN 46615-1011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 436/828 Rpt: 440/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisoni, Katherine <hr/> 6 Contributor address; City; State; Zip Code South Bend, IN 46615-1011	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisoni, Katherine <hr/> Contributor address; City; State; Zip Code South Bend, IN 46615-1011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisoni, Katherine <hr/> Contributor address; City; State; Zip Code South Bend, IN 46615-1011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisoni, Katherine <hr/> Contributor address; City; State; Zip Code South Bend, IN 46615-1011	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litewka, Jack <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94710	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 437/828 Rpt: 441/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litewka, Jack <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94710	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Darlene <hr/> Contributor address; City; State; Zip Code Cypress, CA 90630-3880	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Darlene <hr/> Contributor address; City; State; Zip Code Cypress, CA 90630-3880	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Darlene <hr/> Contributor address; City; State; Zip Code Cypress, CA 90630-3880	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Darlene <hr/> Contributor address; City; State; Zip Code Cypress, CA 90630-3880	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 438/828 Rpt: 442/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littman, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90024-4126	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Television Producer		9 Employer (See Instructions) Jerry Bruckheimer Television
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 439/828 Rpt: 443/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> 6 Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 440/828 Rpt: 444/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> 6 Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 441/828 Rpt: 445/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> 6 Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lombardi, Anne <hr/> Contributor address; City; State; Zip Code Forest Park, IL 60130-3705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonchar, Susan <hr/> Contributor address; City; State; Zip Code Spokane, WA 99201-2948	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonchar, Susan <hr/> Contributor address; City; State; Zip Code Spokane, WA 99201-2948	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 442/828 Rpt: 446/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonchar, Susan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Spokane, WA 99201-2948		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lonchar, Susan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Spokane, WA 99201-2948		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) London, Joanna	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Washington, DC 20016-5534		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) London, Joanna	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Washington, DC 20016-5534		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) London, Joanna	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Washington, DC 20016-5534		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 443/828 Rpt: 447/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) London, Joanna <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20016-5534	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) London, Joanna <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-5534	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenzen, Alan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-5925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenzen, Alan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-5925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenzen, Alan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-5925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 444/828 Rpt: 448/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenzen, Alan <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229-5925	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, William V. <hr/> Contributor address; City; State; Zip Code Durham, NC 27704-1372	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, William V. <hr/> Contributor address; City; State; Zip Code Durham, NC 27704-1372	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luksenburg, Lillian <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20902-1566	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunn, Gerald <hr/> Contributor address; City; State; Zip Code Beverly Hills, CA 90212-3801	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 445/828 Rpt: 449/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunn, Gerald <hr/> 6 Contributor address; City; State; Zip Code Beverly Hills, CA 90212-3801	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunn, Gerald <hr/> Contributor address; City; State; Zip Code Beverly Hills, CA 90212-3801	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunn, Gerald <hr/> Contributor address; City; State; Zip Code Beverly Hills, CA 90212-3801	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunn, Gerald <hr/> Contributor address; City; State; Zip Code Beverly Hills, CA 90212-3801	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupoff, Nancy <hr/> Contributor address; City; State; Zip Code Westport, CT 06880-1120	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 446/828 Rpt: 450/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupoff, Nancy	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Westport, CT 06880-1120		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupoff, Nancy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Westport, CT 06880-1120		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, John	Amount of Contribution (\$) \$325.00
Contributor address; City; State; Zip Code Cherry Hill, NJ 08003-4603		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynt, Richard	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Gainesville, GA 30504-5570		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynt, Richard	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Gainesville, GA 30504-5570		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 447/828 Rpt: 451/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynt, Richard 6 Contributor address; City; State; Zip Code Gainesville, GA 30504-5570	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynt, Richard Contributor address; City; State; Zip Code Gainesville, GA 30504-5570	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynt, Richard Contributor address; City; State; Zip Code Gainesville, GA 30504-5570	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynt, Richard Contributor address; City; State; Zip Code Gainesville, GA 30504-5570	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynt, Richard Contributor address; City; State; Zip Code Gainesville, GA 30504-5570	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 448/828 Rpt: 452/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynt, Richard <hr/> 6 Contributor address; City; State; Zip Code Gainesville, GA 30504-5570	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maben, Aroon <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85255-4496	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maben, Aroon <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85255-4496	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maben, Aroon <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85255-4496	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maben, Aroon <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85255-4496	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 449/828 Rpt: 453/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maben, Aroon <hr/> 6 Contributor address; City; State; Zip Code Scottsdale, AZ 85255-4496	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maben, Aroon <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85255-4496	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maben, Aroon <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85255-4496	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maben, Aroon <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85255-4496	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maben, Aroon <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85255-4496	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 450/828 Rpt: 454/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mack, Robert	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Yorktown Heights, NY 10598-2320		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mack, Robert	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Yorktown Heights, NY 10598-2320		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Douglas	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Middleton, WI 53562-2354		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Douglas	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Middleton, WI 53562-2354		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Douglas	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Middleton, WI 53562-2354		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 451/828 Rpt: 455/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Douglas	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Middleton, WI 53562-2354		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Douglas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Middleton, WI 53562-2354		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Douglas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Middleton, WI 53562-2354		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Douglas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Middleton, WI 53562-2354		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Douglas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Middleton, WI 53562-2354		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 452/828 Rpt: 456/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Norma <hr/> 6 Contributor address; City; State; Zip Code Middleton, WI 53562-2354	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madsen, Norma <hr/> Contributor address; City; State; Zip Code Middleton, WI 53562-2354	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Barbara <hr/> Contributor address; City; State; Zip Code Seattle, WA 98136-2604	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Barbara <hr/> Contributor address; City; State; Zip Code Seattle, WA 98136-2604	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malev, Sheldon <hr/> Contributor address; City; State; Zip Code White Plains, NY 10603-1335	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 453/828 Rpt: 457/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malev, Sheldon	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code White Plains, NY 10603-1335		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malev, Sheldon	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code White Plains, NY 10603-1335		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maltese, Martin	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Portland, OR 97229-4441		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maltese, Martin	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Portland, OR 97229-4441		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Laura	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code New York, NY 10019-3747		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 454/828 Rpt: 458/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Laura <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10019-3747	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Laura <hr/> Contributor address; City; State; Zip Code New York, NY 10019-3747	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Laura <hr/> Contributor address; City; State; Zip Code New York, NY 10019-3747	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Laura <hr/> Contributor address; City; State; Zip Code New York, NY 10019-3747	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Laura <hr/> Contributor address; City; State; Zip Code New York, NY 10019-3747	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 455/828 Rpt: 459/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Laura	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code New York, NY 10019-3747		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Laura	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code New York, NY 10019-3747		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Laura	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code New York, NY 10019-3747		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, John	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Pine Grove, CA 95665-9749		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, John	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Pine Grove, CA 95665-9749		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 456/828 Rpt: 460/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, John <hr/> 6 Contributor address; City; State; Zip Code Pine Grove, CA 95665-9749	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, John <hr/> Contributor address; City; State; Zip Code Pine Grove, CA 95665-9749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, John <hr/> Contributor address; City; State; Zip Code Pine Grove, CA 95665-9749	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, John <hr/> Contributor address; City; State; Zip Code Pine Grove, CA 95665-9749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, John <hr/> Contributor address; City; State; Zip Code Pine Grove, CA 95665-9749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 457/828 Rpt: 461/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, John <hr/> 6 Contributor address; City; State; Zip Code Pine Grove, CA 95665-9749	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manion, Katen <hr/> Contributor address; City; State; Zip Code New York, NY 10011-9402	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manion, Katen <hr/> Contributor address; City; State; Zip Code New York, NY 10011-9402	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manion, Katen <hr/> Contributor address; City; State; Zip Code New York, NY 10011-9402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Jackie <hr/> Contributor address; City; State; Zip Code Mount Kisco, NY 10549-4524	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 458/828 Rpt: 462/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Jackie <hr/> 6 Contributor address; City; State; Zip Code Mount Kisco, NY 10549-4524	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Jackie <hr/> Contributor address; City; State; Zip Code Mount Kisco, NY 10549-4524	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manulis, John <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90064-3402	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcell, Paul <hr/> Contributor address; City; State; Zip Code Morrison, CO 80465-2514	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcell, Paul <hr/> Contributor address; City; State; Zip Code Morrison, CO 80465-2514	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 459/828 Rpt: 463/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcell, Paul <hr/> 6 Contributor address; City; State; Zip Code Morrison, CO 80465-2514	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcell, Paul <hr/> Contributor address; City; State; Zip Code Morrison, CO 80465-2514	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marklund, Soren <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2603	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marklund, Soren <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2603	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marklund, Soren <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2603	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 460/828 Rpt: 464/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markovic, Robert <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90068-2454	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markovic, Robert <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90068-2454	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markovic, Robert <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90068-2454	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markovic, Robert <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90068-2454	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 461/828 Rpt: 465/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> 6 Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 462/828 Rpt: 466/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> 6 Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 463/828 Rpt: 467/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> 6 Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 464/828 Rpt: 468/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Pauline <hr/> 6 Contributor address; City; State; Zip Code Marina Del Rey, CA 90292-5800	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Judith <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55104-6059	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Judith <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55104-6059	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Judith <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55104-6059	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Judith <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55104-6059	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 465/828 Rpt: 469/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Judith <hr/> 6 Contributor address; City; State; Zip Code Saint Paul, MN 55104-6059	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Paul <hr/> Contributor address; City; State; Zip Code Auburn, AL 36830-7036	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Paul <hr/> Contributor address; City; State; Zip Code Auburn, AL 36830-7036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Joseph A. <hr/> Contributor address; City; State; Zip Code Fort Belvoir, VA 22060-2709	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Andrew <hr/> Contributor address; City; State; Zip Code Denver, CO 80231-5739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 466/828 Rpt: 470/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Andrew <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80231-5739	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Andrew <hr/> Contributor address; City; State; Zip Code Denver, CO 80231-5739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Andrew <hr/> Contributor address; City; State; Zip Code Denver, CO 80231-5739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Catherine <hr/> Contributor address; City; State; Zip Code Duvall, WA 98019-8331	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martineau, Sara <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55403-1948	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 467/828 Rpt: 471/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martineau, Sara <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55403-1948	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martineau, Sara <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55403-1948	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maslanka, Linda <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808-5227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maslanka, Linda <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808-5227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maslanka, Linda <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808-5227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 468/828 Rpt: 472/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maslanka, Linda <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19808-5227	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maslanka, Linda <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808-5227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maslanka, Linda <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808-5227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maslanka, Linda <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808-5227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastronarde, Donald <hr/> Contributor address; City; State; Zip Code Albany, CA 94706-1214	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 469/828 Rpt: 473/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastronarde, Donald <hr/> 6 Contributor address; City; State; Zip Code Albany, CA 94706-1214	7 Amount of Contribution (\$) \$105.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastronarde, Donald <hr/> Contributor address; City; State; Zip Code Albany, CA 94706-1214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastronarde, Donald <hr/> Contributor address; City; State; Zip Code Albany, CA 94706-1214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Donald <hr/> Contributor address; City; State; Zip Code Tiburon, CA 94920-1836	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Donald <hr/> Contributor address; City; State; Zip Code Tiburon, CA 94920-1836	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 470/828 Rpt: 474/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Donald <hr/> 6 Contributor address; City; State; Zip Code Tiburon, CA 94920-1836	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Donald <hr/> Contributor address; City; State; Zip Code Tiburon, CA 94920-1836	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattes, Martin <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122-3501	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattes, Martin <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122-3501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurer, Marilyn <hr/> Contributor address; City; State; Zip Code Wynnewood, PA 19096-2208	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 471/828 Rpt: 475/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurer, Marilyn	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Wynnewood, PA 19096-2208		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurine, Camille	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Marina Del Rey, CA 90295-1725		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurine, Camille	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Marina Del Rey, CA 90295-1725		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurine, Camille	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Marina Del Rey, CA 90295-1725		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurine, Camille	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Marina Del Rey, CA 90295-1725		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 472/828 Rpt: 476/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurine, Camille <hr/> 6 Contributor address; City; State; Zip Code Marina Del Rey, CA 90295-1725	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurine, Camille <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90295-1725	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurine, Camille <hr/> Contributor address; City; State; Zip Code Marina Del Rey, CA 90295-1725	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Misty <hr/> Contributor address; City; State; Zip Code Vilas, NC 28692-8373	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Misty <hr/> Contributor address; City; State; Zip Code Vilas, NC 28692-8373	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 473/828 Rpt: 477/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Misty <hr/> 6 Contributor address; City; State; Zip Code Vilas, NC 28692-8373	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Misty <hr/> Contributor address; City; State; Zip Code Vilas, NC 28692-8373	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAdams, Susan <hr/> Contributor address; City; State; Zip Code Washington, DC 20012	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAdams, Susan <hr/> Contributor address; City; State; Zip Code Washington, DC 20012	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAdams, Susan <hr/> Contributor address; City; State; Zip Code Washington, DC 20012	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 474/828 Rpt: 478/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAdams, Susan <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20012	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Anne <hr/> Contributor address; City; State; Zip Code Auburn, CA 95602-9517	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Anne <hr/> Contributor address; City; State; Zip Code Auburn, CA 95602-9517	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Anne <hr/> Contributor address; City; State; Zip Code Auburn, CA 95602-9517	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Anne <hr/> Contributor address; City; State; Zip Code Auburn, CA 95602-9517	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 475/828 Rpt: 479/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCalley, Susan <hr/> 6 Contributor address; City; State; Zip Code Brookline, MA 02445-5328	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCalley, Susan <hr/> Contributor address; City; State; Zip Code Brookline, MA 02445-5328	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCalley, Susan <hr/> Contributor address; City; State; Zip Code Brookline, MA 02445-5328	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Vonya <hr/> Contributor address; City; State; Zip Code Washington, DC 20008-1026	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sprint Corporation
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, William <hr/> Contributor address; City; State; Zip Code Key West, FL 33040-5033	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 476/828 Rpt: 480/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, William <hr/> 6 Contributor address; City; State; Zip Code Key West, FL 33040-5033	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, William <hr/> Contributor address; City; State; Zip Code Key West, FL 33040-5033	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, William <hr/> Contributor address; City; State; Zip Code Key West, FL 33040-5033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, William <hr/> Contributor address; City; State; Zip Code Key West, FL 33040-5033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, William <hr/> Contributor address; City; State; Zip Code Key West, FL 33040-5033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 477/828 Rpt: 481/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, William	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Key West, FL 33040-5033		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClintock, Dylan	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Oakland, CA 94608-2827		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClintock, Shirley A.	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Kissimmee, FL 34744-9265		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClintock, Shirley A.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Kissimmee, FL 34744-9265		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClintock, Shirley A.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Kissimmee, FL 34744-9265		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 478/828 Rpt: 482/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClintock, Shirley A. <hr/> 6 Contributor address; City; State; Zip Code Kissimmee, FL 34744-9265	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 479/828 Rpt: 483/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> 6 Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 480/828 Rpt: 484/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Guyer <hr/> 6 Contributor address; City; State; Zip Code Alburgh, VT 05440-9668	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCrorey, Mary <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90035-0156	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCrorey, Mary <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90035-0156	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCrorey, Mary <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90035-0156	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125-6827	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 481/828 Rpt: 485/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98125-6827	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125-6827	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125-6827	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125-6827	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125-6827	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 482/828 Rpt: 486/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98125-6827	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125-6827	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125-6827	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125-6827	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125-6827	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 483/828 Rpt: 487/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Diane <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98125-6827	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Mary <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94121-2531	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Stacy <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90807-1918	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Stacy <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90807-1918	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, John <hr/> Contributor address; City; State; Zip Code Meadville, PA 16335-8690	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 484/828 Rpt: 488/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGowan, John <hr/> 6 Contributor address; City; State; Zip Code Meadville, PA 16335-8690	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntyre, Daniel <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90808-2139	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntyre, Daniel <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90808-2139	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntyre, Daniel <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90808-2139	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntyre, Daniel <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90808-2139	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 485/828 Rpt: 489/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenna, Christine S. <hr/> 6 Contributor address; City; State; Zip Code Rancho Mirage, CA 92270-5674	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenna, Christine S. <hr/> Contributor address; City; State; Zip Code Rancho Mirage, CA 92270-5674	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenna, Christine S. <hr/> Contributor address; City; State; Zip Code Rancho Mirage, CA 92270-5674	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenna, Christine S. <hr/> Contributor address; City; State; Zip Code Rancho Mirage, CA 92270-5674	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLaughlin, Sean <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217-1387	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 486/828 Rpt: 490/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLaughlin, Sean <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11217-1387	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLaughlin, Sean <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217-1387	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLaughlin, Sean <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217-1387	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeil, Leslie <hr/> Contributor address; City; State; Zip Code Rhinebeck, NY 12572-1628	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeill, Patrick <hr/> Contributor address; City; State; Zip Code Monterey, CA 93940-3019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 487/828 Rpt: 491/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeill, Patrick <hr/> 6 Contributor address; City; State; Zip Code Monterey, CA 93940-3019	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen <hr/> Contributor address; City; State; Zip Code Brookville, OH 45309-1614	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen <hr/> Contributor address; City; State; Zip Code Brookville, OH 45309-1614	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen <hr/> Contributor address; City; State; Zip Code Brookville, OH 45309-1614	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen <hr/> Contributor address; City; State; Zip Code Brookville, OH 45309-1614	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 488/828 Rpt: 492/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Brookville, OH 45309-1614		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brookville, OH 45309-1614		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brookville, OH 45309-1614		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brookville, OH 45309-1614		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brookville, OH 45309-1614		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 489/828 Rpt: 493/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Brookville, OH 45309-1614		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brookville, OH 45309-1614		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNew, Stephen	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Brookville, OH 45309-1614		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melancon, H.	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Hendersonville, TN 37075-4868		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melancon, H.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Hendersonville, TN 37075-4868		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 490/828 Rpt: 494/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melancon, H.	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Hendersonville, TN 37075-4868	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melancon, H.	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Hendersonville, TN 37075-4868	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401-2503	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401-2503	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401-2503	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 491/828 Rpt: 495/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Bellaire, TX 77401-2503		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bellaire, TX 77401-2503		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bellaire, TX 77401-2503		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bellaire, TX 77401-2503		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bellaire, TX 77401-2503		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 492/828 Rpt: 496/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanson, Christianne <hr/> 6 Contributor address; City; State; Zip Code Bellaire, TX 77401-2503	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellem, Roger <hr/> Contributor address; City; State; Zip Code Seattle, WA 98107-3215	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellem, Roger <hr/> Contributor address; City; State; Zip Code Seattle, WA 98107-3215	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellem, Roger <hr/> Contributor address; City; State; Zip Code Seattle, WA 98107-3215	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellem, Roger <hr/> Contributor address; City; State; Zip Code Seattle, WA 98107-3215	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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SCHEDULE A1

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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellem, Roger <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98107-3215	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellem, Roger <hr/> Contributor address; City; State; Zip Code Seattle, WA 98107-3215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melton, Julie <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87507-9650	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melton, Julie <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87507-9650	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menaker, Thomas <hr/> Contributor address; City; State; Zip Code New City, NY 10956-5702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 494/828 Rpt: 498/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menaker, Thomas	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code New City, NY 10956-5702		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menaker, Thomas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New City, NY 10956-5702		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menaker, Thomas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New City, NY 10956-5702		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menaker, Thomas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New City, NY 10956-5702		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menaker, Thomas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New City, NY 10956-5702		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menaker, Thomas <hr/> 6 Contributor address; City; State; Zip Code New City, NY 10956-5702	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendel, Mark <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115-7942	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions) Mendel Consulting LLC
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendenhall, Douglas <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-7512	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendenhall, Douglas <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-7512	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendenhall, Douglas <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-7512	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 496/828 Rpt: 500/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mengarelli, Francesca <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20016-3171	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mengarelli, Francesca <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-3171	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mengarelli, Francesca <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-3171	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mengarelli, Francesca <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-3171	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki <hr/> Contributor address; City; State; Zip Code Bothell, WA 98012-6671	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 497/828 Rpt: 501/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Bothell, WA 98012-6671		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Bothell, WA 98012-6671		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bothell, WA 98012-6671		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bothell, WA 98012-6671		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Bothell, WA 98012-6671		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki <hr/> 6 Contributor address; City; State; Zip Code Bothell, WA 98012-6671	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki <hr/> Contributor address; City; State; Zip Code Bothell, WA 98012-6671	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki <hr/> Contributor address; City; State; Zip Code Bothell, WA 98012-6671	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrick, Mary Jane <hr/> Contributor address; City; State; Zip Code Park Ridge, IL 60068-3519	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrick, Mary Jane <hr/> Contributor address; City; State; Zip Code Park Ridge, IL 60068-3519	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 499/828 Rpt: 503/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrick, Mary Jane <hr/> 6 Contributor address; City; State; Zip Code Park Ridge, IL 60068-3519	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrick, Mary Jane <hr/> Contributor address; City; State; Zip Code Park Ridge, IL 60068-3519	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrick, Mary Jane <hr/> Contributor address; City; State; Zip Code Park Ridge, IL 60068-3519	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merryman, Betsy <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277-6401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merryman, Betsy <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277-6401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merryman, Betsy <hr/> 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90277-6401	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merryman, Betsy <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277-6401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merryman, Betsy <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277-6401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merryman, Betsy <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277-6401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merryman, Betsy <hr/> Contributor address; City; State; Zip Code Redondo Beach, CA 90277-6401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merryman, Betsy <hr/> 6 Contributor address; City; State; Zip Code Redondo Beach, CA 90277-6401	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mersereau, Wallace D. <hr/> Contributor address; City; State; Zip Code San Mateo, CA 94402-2852	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesner, Kathryn <hr/> Contributor address; City; State; Zip Code Central City, NE 68826-9760	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesner, Kathryn <hr/> Contributor address; City; State; Zip Code Central City, NE 68826-9760	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesner, Kathryn <hr/> Contributor address; City; State; Zip Code Central City, NE 68826-9760	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 502/828 Rpt: 506/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesner, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Central City, NE 68826-9760	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messina, Gerald <hr/> Contributor address; City; State; Zip Code Wyckoff, NJ 07481-3024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messina, Gerald <hr/> Contributor address; City; State; Zip Code Wyckoff, NJ 07481-3024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metoyer, Gregory <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087-0070	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metoyer, Gregory <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087-0070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 503/828 Rpt: 507/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Gregory <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78249-2424	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Gregory <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249-2424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Gregory <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249-2424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Pat <hr/> Contributor address; City; State; Zip Code Stamford, CT 06905-2621	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Rosemarie <hr/> Contributor address; City; State; Zip Code Mount Prospect, IL 60056-3530	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 504/828 Rpt: 508/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Rosemarie	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Mount Prospect, IL 60056-3530		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Rosemarie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Mount Prospect, IL 60056-3530		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Rosemarie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Mount Prospect, IL 60056-3530		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Rosemarie	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Mount Prospect, IL 60056-3530		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Rosemarie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Mount Prospect, IL 60056-3530		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 505/828 Rpt: 509/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Rosemarie <hr/> 6 Contributor address; City; State; Zip Code Mount Prospect, IL 60056-3530	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer-Benz, Coco <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87506-4530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer-Benz, Coco <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87506-4530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer-Benz, Coco <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87506-4530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer-Benz, Coco <hr/> Contributor address; City; State; Zip Code Santa Fe, NM 87506-4530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 506/828 Rpt: 510/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer-Benz, Coco <hr/> 6 Contributor address; City; State; Zip Code Santa Fe, NM 87506-4530	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer-Mitchell, Johanna <hr/> Contributor address; City; State; Zip Code Martinez, CA 94553-5300	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer-Mitchell, Johanna <hr/> Contributor address; City; State; Zip Code Martinez, CA 94553-5300	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mezger, Tobias <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94118-2721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mezger, Tobias <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94118-2721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 507/828 Rpt: 511/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mezger, Tobias <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94118-2721	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mezger, Tobias <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94118-2721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, John <hr/> Contributor address; City; State; Zip Code Rockville, MD 20850-6183	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, John <hr/> Contributor address; City; State; Zip Code Rockville, MD 20850-6183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaud, Steven <hr/> Contributor address; City; State; Zip Code Sycamore, IL 60178-1331	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 508/828 Rpt: 512/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mieczkowski, John <hr/> 6 Contributor address; City; State; Zip Code Westland, MI 48185-1071	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mieczkowski, John <hr/> Contributor address; City; State; Zip Code Westland, MI 48185-1071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mieczkowski, John <hr/> Contributor address; City; State; Zip Code Westland, MI 48185-1071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mieczkowski, John <hr/> Contributor address; City; State; Zip Code Westland, MI 48185-1071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mieczkowski, John <hr/> Contributor address; City; State; Zip Code Westland, MI 48185-1071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 509/828 Rpt: 513/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miles, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20012-1201	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miles, Margaret <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-8527	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miles, Margaret <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-8527	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miles, Margaret <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-8527	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miles, Margaret <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-8527	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 510/828 Rpt: 514/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miles, Margaret <hr/> 6 Contributor address; City; State; Zip Code Chapel Hill, NC 27517-8527	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milgrom, Gary <hr/> Contributor address; City; State; Zip Code Bronx, NY 10463-3135	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milgrom, Gary <hr/> Contributor address; City; State; Zip Code Bronx, NY 10463-3135	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milgrom, Gary <hr/> Contributor address; City; State; Zip Code Bronx, NY 10463-3135	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milgrom, Maria <hr/> Contributor address; City; State; Zip Code Bronx, NY 10463-3135	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 511/828 Rpt: 515/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milgrom, Maria	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Bronx, NY 10463-3135		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milgrom, Maria	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Bronx, NY 10463-3135		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 512/828 Rpt: 516/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> 6 Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 513/828 Rpt: 517/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> 6 Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 514/828 Rpt: 518/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> 6 Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 515/828 Rpt: 519/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> 6 Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 516/828 Rpt: 520/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> 6 Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millavec, Robert <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-3027	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Fran <hr/> Contributor address; City; State; Zip Code San Pedro, CA 90732-3214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 517/828 Rpt: 521/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Harry <hr/> 6 Contributor address; City; State; Zip Code Interlaken, NY 14847-0045	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Harry <hr/> Contributor address; City; State; Zip Code Interlaken, NY 14847-0045	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Harry <hr/> Contributor address; City; State; Zip Code Interlaken, NY 14847-0045	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Harry <hr/> Contributor address; City; State; Zip Code Interlaken, NY 14847-0045	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John <hr/> Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-3556	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 518/828 Rpt: 522/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-3556		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-3556		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-3556		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-3556		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-3556		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 519/828 Rpt: 523/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John <hr/> 6 Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-3556	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John <hr/> Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-3556	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John <hr/> Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-3556	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, William <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707-2707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, William <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707-2707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 520/828 Rpt: 524/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, William <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94707-2707	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, William <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707-2707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Erie <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566-7267	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Erie <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566-7267	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Erie <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566-7267	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 521/828 Rpt: 525/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Erie <hr/> 6 Contributor address; City; State; Zip Code Pleasanton, CA 94566-7267	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millsaps, Cynthia <hr/> Contributor address; City; State; Zip Code Lakeside, CA 92040-5820	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millsaps, Cynthia <hr/> Contributor address; City; State; Zip Code Lakeside, CA 92040-5820	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Ann Marie <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94704-3304	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Ann Marie <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94704-3304	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 522/828 Rpt: 526/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Ann Marie <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94704-3304	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Ann Marie <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94704-3304	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, J.R. <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4028	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, James R. <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4028	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modley, Phyllis <hr/> Contributor address; City; State; Zip Code Hinesburg, VT 05461-9586	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 523/828 Rpt: 527/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modley, Phyllis <hr/> 6 Contributor address; City; State; Zip Code Hinesburg, VT 05461-9586	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modley, Phyllis <hr/> Contributor address; City; State; Zip Code Hinesburg, VT 05461-9586	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mogil, Rona <hr/> Contributor address; City; State; Zip Code Germantown, TN 38139-6571	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mogil, Rona <hr/> Contributor address; City; State; Zip Code Germantown, TN 38139-6571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mogil, Rona <hr/> Contributor address; City; State; Zip Code Germantown, TN 38139-6571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 524/828 Rpt: 528/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mogil, Rona <hr/> 6 Contributor address; City; State; Zip Code Germantown, TN 38139-6571	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mogil, Rona <hr/> Contributor address; City; State; Zip Code Germantown, TN 38139-6571	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mogol, Linda <hr/> Contributor address; City; State; Zip Code San Diego, CA 92127-2552	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohrman, William <hr/> Contributor address; City; State; Zip Code Lone Tree, CO 80124-3111	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohrman, William <hr/> Contributor address; City; State; Zip Code Lone Tree, CO 80124-3111	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 525/828 Rpt: 529/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohrman, William	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Lone Tree, CO 80124-3111		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohrman, William	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lone Tree, CO 80124-3111		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 526/828 Rpt: 530/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> 6 Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 527/828 Rpt: 531/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> 6 Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 528/828 Rpt: 532/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> 6 Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monder, Steven <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45215-4105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montague, Steve <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072-6223	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montague, Steve <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072-6223	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 529/828 Rpt: 533/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montague, Steve <hr/> 6 Contributor address; City; State; Zip Code Woodinville, WA 98072-6223	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montague, Steve <hr/> Contributor address; City; State; Zip Code Woodinville, WA 98072-6223	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montevaldo, Sandy <hr/> Contributor address; City; State; Zip Code San Mateo, CA 94402-2230	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moody, Stephen <hr/> Contributor address; City; State; Zip Code Brookline, MA 02445-6029	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Jill <hr/> Contributor address; City; State; Zip Code Bollinas, CA 94924	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 530/828 Rpt: 534/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Todd J.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Seattle, WA 98144-6934	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Todd J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Seattle, WA 98144-6934	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Todd J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Seattle, WA 98144-6934	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Todd J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Seattle, WA 98144-6934	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Todd J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Seattle, WA 98144-6934	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 531/828 Rpt: 535/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Todd J. <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98144-6934	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Marian L. <hr/> Contributor address; City; State; Zip Code Vienna, VA 22182-3430	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morkill, Barbara <hr/> Contributor address; City; State; Zip Code Spokane, WA 99208-9204	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morkill, Barbara <hr/> Contributor address; City; State; Zip Code Spokane, WA 99208-9204	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morley, William <hr/> Contributor address; City; State; Zip Code Atascadero, CA 93422-4438	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 532/828 Rpt: 536/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Richard <hr/> 6 Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Richard <hr/> Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Richard <hr/> Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Richard <hr/> Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Richard <hr/> Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 533/828 Rpt: 537/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Richard <hr/> 6 Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Richard <hr/> Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Richard <hr/> Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Richard <hr/> Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morse, Allison <hr/> Contributor address; City; State; Zip Code Sherman Oaks, CA 91403-5035	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 534/828 Rpt: 538/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morse, Allison <hr/> 6 Contributor address; City; State; Zip Code Sherman Oaks, CA 91403-5035	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morse, Michael <hr/> Contributor address; City; State; Zip Code Woburn, MA 01801-5453	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morse, Michael <hr/> Contributor address; City; State; Zip Code Woburn, MA 01801-5453	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morse, Michael <hr/> Contributor address; City; State; Zip Code Woburn, MA 01801-5453	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morse, Michael <hr/> Contributor address; City; State; Zip Code Woburn, MA 01801-5453	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosca, Eugene O. <hr/> 6 Contributor address; City; State; Zip Code Kutztown, PA 19530-1704	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosca, Eugene O. <hr/> Contributor address; City; State; Zip Code Kutztown, PA 19530-1704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosca, Eugene O. <hr/> Contributor address; City; State; Zip Code Kutztown, PA 19530-1704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosca, Eugene O. <hr/> Contributor address; City; State; Zip Code Kutztown, PA 19530-1704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosca, Eugene O. <hr/> Contributor address; City; State; Zip Code Kutztown, PA 19530-1704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosca, Eugene O.	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Kutztown, PA 19530-1704	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Guy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Mokena, IL 60448-1501	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Guy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Mokena, IL 60448-1501	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Guy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Mokena, IL 60448-1501	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Guy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Mokena, IL 60448-1501	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 537/828 Rpt: 541/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosier, Jenny <hr/> 6 Contributor address; City; State; Zip Code Bethesda, MD 20817-2051	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mountain, Pauline <hr/> Contributor address; City; State; Zip Code Huntsville, AL 35801-6201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mountain, Pauline <hr/> Contributor address; City; State; Zip Code Huntsville, AL 35801-6201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mountain, Pauline <hr/> Contributor address; City; State; Zip Code Huntsville, AL 35801-6201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mountain, Pauline <hr/> Contributor address; City; State; Zip Code Huntsville, AL 35801-6201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 538/828 Rpt: 542/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Joan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731-6065	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-6065	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-6065	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-6065	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-6065	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 539/828 Rpt: 543/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Zach <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75231-5981	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Zach <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231-5981	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller, Vincent <hr/> Contributor address; City; State; Zip Code Hatfield, PA 19440-3141	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller, Vincent <hr/> Contributor address; City; State; Zip Code Hatfield, PA 19440-3141	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller, Vincent <hr/> Contributor address; City; State; Zip Code Hatfield, PA 19440-3141	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 540/828 Rpt: 544/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller, Vincent <hr/> 6 Contributor address; City; State; Zip Code Hatfield, PA 19440-3141	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller, Vincent <hr/> Contributor address; City; State; Zip Code Hatfield, PA 19440-3141	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muller, Vincent <hr/> Contributor address; City; State; Zip Code Hatfield, PA 19440-3141	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, Myra <hr/> Contributor address; City; State; Zip Code Juneau, AK 99801-1334	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sonosky Chambers Law Firm LLP
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, Myra <hr/> Contributor address; City; State; Zip Code Juneau, AK 99801-1334	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sonosky Chambers Law Firm LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 541/828 Rpt: 545/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, Myra <hr/> 6 Contributor address; City; State; Zip Code Juneau, AK 99801-1334	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Sonosky Chambers Law Firm LLP
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, Myra <hr/> Contributor address; City; State; Zip Code Juneau, AK 99801-1334	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sonosky Chambers Law Firm LLP
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murin, Dawn <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-3018	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murin, Dawn <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-3018	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murin, Dawn <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-3018	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murin, Dawn <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98116-3018	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murin, Dawn <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-3018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murin, Dawn <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-3018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murin, Dawn <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116-3018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
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Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 543/828 Rpt: 547/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Cassie	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Templeton, CA 93465-4512		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Cassie	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Templeton, CA 93465-4512		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Cassie	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Templeton, CA 93465-4512		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Cassie	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Templeton, CA 93465-4512		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
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4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Cassie	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Templeton, CA 93465-4512		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murtagh, Mary	Amount of Contribution (\$) \$700.00
Contributor address; City; State; Zip Code Berkeley, CA 94707-2020		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murtagh, Mary	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Berkeley, CA 94707-2020		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$15.00
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Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> 6 Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 547/828 Rpt: 551/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> 6 Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 548/828 Rpt: 552/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> 6 Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 549/828 Rpt: 553/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> 6 Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 550/828 Rpt: 554/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> 6 Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 551/828 Rpt: 555/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> 6 Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nasri, Fred <hr/> Contributor address; City; State; Zip Code Playa Vista, CA 90094-2087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nath, Brian <hr/> Contributor address; City; State; Zip Code North Kingstown, RI 02852-3515	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 552/828 Rpt: 556/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nath, Brian <hr/> 6 Contributor address; City; State; Zip Code North Kingstown, RI 02852-3515	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nath, Brian <hr/> Contributor address; City; State; Zip Code North Kingstown, RI 02852-3515	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan, Katharine <hr/> Contributor address; City; State; Zip Code Chicago, IL 60645-4905	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan, Katharine <hr/> Contributor address; City; State; Zip Code Chicago, IL 60645-4905	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan, Katharine <hr/> Contributor address; City; State; Zip Code Chicago, IL 60645-4905	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 553/828 Rpt: 557/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan, Katharine <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60645-4905	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan, Katharine <hr/> Contributor address; City; State; Zip Code Chicago, IL 60645-4905	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson, Constance <hr/> Contributor address; City; State; Zip Code New York, NY 10044-0160	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson, Constance <hr/> Contributor address; City; State; Zip Code New York, NY 10044-0160	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson, Constance <hr/> Contributor address; City; State; Zip Code New York, NY 10044-0160	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 554/828 Rpt: 558/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson, Constance	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code New York, NY 10044-0160		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson, Constance	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New York, NY 10044-0160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson, Constance	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New York, NY 10044-0160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson, Constance	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New York, NY 10044-0160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathanson, Constance	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New York, NY 10044-0160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 555/828 Rpt: 559/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naus, James H.	7 Amount of Contribution (\$) \$400.00
	6 Contributor address; City; State; Zip Code Indianapolis, IN 46204-2312	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Mary	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Saint Louis, MO 63105-2110	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neece, Emily	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Fairport, NY 14450-4135	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neece, Emily	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Fairport, NY 14450-4135	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neece, Emily	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Fairport, NY 14450-4135	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 556/828 Rpt: 560/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelsen, Judith <hr/> 6 Contributor address; City; State; Zip Code Fort Wayne, IN 46804-7008	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelsen, Judith <hr/> Contributor address; City; State; Zip Code Fort Wayne, IN 46804-7008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelsen, Judith <hr/> Contributor address; City; State; Zip Code Fort Wayne, IN 46804-7008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelsen, Judith <hr/> Contributor address; City; State; Zip Code Fort Wayne, IN 46804-7008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Camille <hr/> Contributor address; City; State; Zip Code Brookhaven, GA 30329-1681	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 557/828 Rpt: 561/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Karen <hr/> 6 Contributor address; City; State; Zip Code San Jose, CA 95125-2441	7 Amount of Contribution (\$) \$123.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Kimberly <hr/> Contributor address; City; State; Zip Code Akron, OH 44333-4700	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Kimberly <hr/> Contributor address; City; State; Zip Code Akron, OH 44333-4700	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Mary <hr/> Contributor address; City; State; Zip Code Kenmore, WA 98028-3902	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Mary <hr/> Contributor address; City; State; Zip Code Kenmore, WA 98028-3902	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 558/828 Rpt: 562/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettelmann, William <hr/> 6 Contributor address; City; State; Zip Code APO, DC 09603-0044	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettelmann, William <hr/> Contributor address; City; State; Zip Code APO, DC 09603-0044	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettelmann, William <hr/> Contributor address; City; State; Zip Code APO, DC 09603-0044	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettelmann, William <hr/> Contributor address; City; State; Zip Code APO, DC 09603-0044	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumann, Peter <hr/> Contributor address; City; State; Zip Code Reno, NV 89501-1712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 559/828 Rpt: 563/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumann, Peter <hr/> 6 Contributor address; City; State; Zip Code Reno, NV 89501-1712	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumann, Peter <hr/> Contributor address; City; State; Zip Code Reno, NV 89501-1712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R. <hr/> Contributor address; City; State; Zip Code Salinas, CA 93907-9114	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R. <hr/> Contributor address; City; State; Zip Code Salinas, CA 93907-9114	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R. <hr/> Contributor address; City; State; Zip Code Salinas, CA 93907-9114	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 560/828 Rpt: 564/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Salinas, CA 93907-9114		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Salinas, CA 93907-9114		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Salinas, CA 93907-9114		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Salinas, CA 93907-9114		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Salinas, CA 93907-9114		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 561/828 Rpt: 565/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Salinas, CA 93907-9114	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Salinas, CA 93907-9114	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Salinas, CA 93907-9114	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Salinas, CA 93907-9114	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene R.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Salinas, CA 93907-9114	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 562/828 Rpt: 566/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neustadt, Philip	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Greensboro, NC 27455-3441		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neustadt, Philip	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Greensboro, NC 27455-3441		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neustadt, Philip	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Greensboro, NC 27455-3441		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neustadt, Philip	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Greensboro, NC 27455-3441		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neustadt, Philip	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Greensboro, NC 27455-3441		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 563/828 Rpt: 567/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman Zohir, Katharine <hr/> 6 Contributor address; City; State; Zip Code Celebration, FL 34747-5476	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman Zohir, Katharine <hr/> Contributor address; City; State; Zip Code Celebration, FL 34747-5476	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman Zohir, Katharine <hr/> Contributor address; City; State; Zip Code Celebration, FL 34747-5476	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman Zohir, Katharine <hr/> Contributor address; City; State; Zip Code Celebration, FL 34747-5476	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niemann, Christine <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22308-2226	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 564/828 Rpt: 568/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niemann, Edward <hr/> 6 Contributor address; City; State; Zip Code Harrisburg, PA 17112-2102	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niemann, Edward <hr/> Contributor address; City; State; Zip Code Harrisburg, PA 17112-2102	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niemann, Edward <hr/> Contributor address; City; State; Zip Code Harrisburg, PA 17112-2102	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niemann, Edward <hr/> Contributor address; City; State; Zip Code Harrisburg, PA 17112-2102	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsson, Lena <hr/> Contributor address; City; State; Zip Code Goodrich, MI 48438-9719	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 565/828 Rpt: 569/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilsson, Lena <hr/> 6 Contributor address; City; State; Zip Code Goodrich, MI 48438-9719	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noeker, Ray <hr/> Contributor address; City; State; Zip Code Cromwell, CT 06416-2728	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noeker, Ray <hr/> Contributor address; City; State; Zip Code Cromwell, CT 06416-2728	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noeker, Ray <hr/> Contributor address; City; State; Zip Code Cromwell, CT 06416-2728	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noel, John <hr/> Contributor address; City; State; Zip Code Nashville, TN 37215	Amount of Contribution (\$) \$3,500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 566/828 Rpt: 570/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nord, Ray <hr/> 6 Contributor address; City; State; Zip Code Naples, FL 34108-6738	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nord, Ray <hr/> Contributor address; City; State; Zip Code Naples, FL 34108-6738	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nord, Ray <hr/> Contributor address; City; State; Zip Code Naples, FL 34108-6738	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norek, Josh <hr/> Contributor address; City; State; Zip Code Lafayette, CA 94549-5424	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northrup, James D. <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94703-1421	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Technical Director		Employer (See Instructions) Pixar Animation Studios

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 567/828 Rpt: 571/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northrup, James D.	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Berkeley, CA 94703-1421		
8 Principal occupation / Job title (See Instructions) Technical Director		9 Employer (See Instructions) Pixar Animation Studios
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northrup, James D.	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Berkeley, CA 94703-1421		
Principal occupation / Job title (See Instructions) Technical Director		Employer (See Instructions) Pixar Animation Studios
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northrup, James D.	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Berkeley, CA 94703-1421		
Principal occupation / Job title (See Instructions) Technical Director		Employer (See Instructions) Pixar Animation Studios
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northrup, James D.	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Berkeley, CA 94703-1421		
Principal occupation / Job title (See Instructions) Technical Director		Employer (See Instructions) Pixar Animation Studios
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Notthoff, Ann	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Orinda, CA 94563-1813		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 568/828 Rpt: 572/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Notthoff, Ann <hr/> 6 Contributor address; City; State; Zip Code Orinda, CA 94563-1813	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novak, Rita <hr/> Contributor address; City; State; Zip Code Chicago, IL 60605-2060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novak, Rita <hr/> Contributor address; City; State; Zip Code Chicago, IL 60605-2060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novak, Rita <hr/> Contributor address; City; State; Zip Code Chicago, IL 60605-2060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novak, Rita <hr/> Contributor address; City; State; Zip Code Chicago, IL 60605-2060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 569/828 Rpt: 573/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyaggah, Lynette B <hr/> 6 Contributor address; City; State; Zip Code Placentia, CA 92871-9563	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nyaggah, Lynette B <hr/> Contributor address; City; State; Zip Code Placentia, CA 92871-9563	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nye, Nancy <hr/> Contributor address; City; State; Zip Code Durham, NC 27701-1311	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nye, Nancy <hr/> Contributor address; City; State; Zip Code Durham, NC 27701-1311	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Flannigan, Michael <hr/> Contributor address; City; State; Zip Code Washington, DC 20000	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 570/828 Rpt: 574/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Adele <hr/> 6 Contributor address; City; State; Zip Code Stockton, CA 95207-1701	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Adele <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207-1701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Adele <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207-1701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Adele <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207-1701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Adele <hr/> Contributor address; City; State; Zip Code Stockton, CA 95207-1701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 571/828 Rpt: 575/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Tain, Marilyn <hr/> 6 Contributor address; City; State; Zip Code Shelbyville, IN 46176-8774	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oduwole, Olu <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94582-5596	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oduwole, Olu <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94582-5596	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oduwole, Olu <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94582-5596	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oduwole, Olu <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94582-5596	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 572/828 Rpt: 576/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oduwole, Olu <hr/> 6 Contributor address; City; State; Zip Code San Ramon, CA 94582-5596	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oduwole, Olu <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94582-5596	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oduwole, Olu <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94582-5596	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olling, Robert P. <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20910-1362	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olling, Robert P. <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20910-1362	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 573/828 Rpt: 577/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olling, Robert P. <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20910-1362	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olling, Robert P. <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20910-1362	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Barbara T. <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20877-2832	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Barbara T. <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20877-2832	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Linda <hr/> Contributor address; City; State; Zip Code Waitsfield, VT 05673-4424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 574/828 Rpt: 578/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Linda <hr/> 6 Contributor address; City; State; Zip Code Waitsfield, VT 05673-4424	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Linda <hr/> Contributor address; City; State; Zip Code Waitsfield, VT 05673-4424	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 575/828 Rpt: 579/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne <hr/> 6 Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne <hr/> Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 576/828 Rpt: 580/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne	7 Amount of Contribution (\$) \$8.00
6 Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 577/828 Rpt: 581/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Wayne <hr/> 6 Contributor address; City; State; Zip Code Broken Arrow, OK 74012-0458	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orenstein, Ken <hr/> Contributor address; City; State; Zip Code Providence, RI 02906-4212	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Toni <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90815-1257	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Toni <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90815-1257	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Toni <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90815-1257	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 578/828 Rpt: 582/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ottaviano, Deanne	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Chevy Chase, MD 20815-4224		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ottaviano, Deanne	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Chevy Chase, MD 20815-4224		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ottaviano, Deanne	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Chevy Chase, MD 20815-4224		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ottaviano, Deanne	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Chevy Chase, MD 20815-4224		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ottaviano, Deanne	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Chevy Chase, MD 20815-4224		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 579/828 Rpt: 583/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Outten, Craig <hr/> 6 Contributor address; City; State; Zip Code Rydal, PA 19046-2947	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Outten, Craig <hr/> Contributor address; City; State; Zip Code Rydal, PA 19046-2947	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Outten, Craig <hr/> Contributor address; City; State; Zip Code Rydal, PA 19046-2947	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Outten, Craig <hr/> Contributor address; City; State; Zip Code Rydal, PA 19046-2947	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Outten, Craig <hr/> Contributor address; City; State; Zip Code Rydal, PA 19046-2947	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 580/828 Rpt: 584/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Outten, Craig <hr/> 6 Contributor address; City; State; Zip Code Rydal, PA 19046-2947	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Outten, Craig <hr/> Contributor address; City; State; Zip Code Rydal, PA 19046-2947	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Outten, Craig <hr/> Contributor address; City; State; Zip Code Rydal, PA 19046-2947	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ovink, Jennifer D. <hr/> Contributor address; City; State; Zip Code Richland, WA 99354-1642	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ovink, Jennifer D. <hr/> Contributor address; City; State; Zip Code Richland, WA 99354-1642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 581/828 Rpt: 585/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, Patricia <hr/> 6 Contributor address; City; State; Zip Code Encinitas, CA 92024-7720	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, Patricia <hr/> Contributor address; City; State; Zip Code Encinitas, CA 92024-7720	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pabst, Patricia <hr/> Contributor address; City; State; Zip Code Encinitas, CA 92024-7720	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pankow, James <hr/> Contributor address; City; State; Zip Code Portland, OR 97229-3778	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantos, Alexandra <hr/> Contributor address; City; State; Zip Code Upton, MA 01568-1111	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 582/828 Rpt: 586/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantos, Alexandra <hr/> 6 Contributor address; City; State; Zip Code Upton, MA 01568-1111	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papp, Gail <hr/> Contributor address; City; State; Zip Code New York, NY 10003-6425	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parfrey, Susan <hr/> Contributor address; City; State; Zip Code Flushing, NY 11358-3823	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parfrey, Susan <hr/> Contributor address; City; State; Zip Code Flushing, NY 11358-3823	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parfrey, Susan <hr/> Contributor address; City; State; Zip Code Flushing, NY 11358-3823	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 583/828 Rpt: 587/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Roxanna M.	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Smartsville, CA 95977-0007		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Roxanna M.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Smartsville, CA 95977-0007		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Roxanna M.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Smartsville, CA 95977-0007		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Roxanna M.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Smartsville, CA 95977-0007		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Roxanna M.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Smartsville, CA 95977-0007		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 584/828 Rpt: 588/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parmalee, Katherine <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20910-5433	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parmalee, Katherine <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20910-5433	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parmalee, Katherine <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20910-5433	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parness, Joanna <hr/> Contributor address; City; State; Zip Code Half Moon Bay, CA 94019-1550	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, John H. <hr/> Contributor address; City; State; Zip Code Kitty Hawk, NC 27949-3959	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 585/828 Rpt: 589/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, John H.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Kitty Hawk, NC 27949-3959	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, John H.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kitty Hawk, NC 27949-3959	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, John H.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kitty Hawk, NC 27949-3959	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, John H.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kitty Hawk, NC 27949-3959	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, John H.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kitty Hawk, NC 27949-3959	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 586/828 Rpt: 590/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, John H.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Kitty Hawk, NC 27949-3959	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, John H.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Kitty Hawk, NC 27949-3959	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastin, Susan S.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Chicago, IL 60626-2656	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastin, Susan S.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Chicago, IL 60626-2656	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastin, Susan S.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Chicago, IL 60626-2656	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 587/828 Rpt: 591/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastin, Susan S.	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Chicago, IL 60626-2656	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastin, Susan S.	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Chicago, IL 60626-2656	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastin, Susan S.	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Chicago, IL 60626-2656	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pattison, Cynthia	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107-3094	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pattison, Cynthia	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107-3094	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 588/828 Rpt: 592/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pattison, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107-3094	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pattison, Cynthia <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107-3094	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Rodman <hr/> Contributor address; City; State; Zip Code New York, NY 10075-0571	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Rodman <hr/> Contributor address; City; State; Zip Code New York, NY 10075-0571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Rodman <hr/> Contributor address; City; State; Zip Code New York, NY 10075-0571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 589/828 Rpt: 593/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavelchek, David <hr/> 6 Contributor address; City; State; Zip Code Olympia, WA 98502-4269	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavelchek, David <hr/> Contributor address; City; State; Zip Code Olympia, WA 98502-4269	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavelchek, David <hr/> Contributor address; City; State; Zip Code Olympia, WA 98502-4269	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavelchek, David <hr/> Contributor address; City; State; Zip Code Olympia, WA 98502-4269	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavelchek, David <hr/> Contributor address; City; State; Zip Code Olympia, WA 98502-4269	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 590/828 Rpt: 594/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, Susan <hr/> 6 Contributor address; City; State; Zip Code Mill Valley, CA 94941-1117	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, Susan <hr/> Contributor address; City; State; Zip Code Mill Valley, CA 94941-1117	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedersen, Bruce <hr/> Contributor address; City; State; Zip Code Sunnyvale, CA 94089-4619	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedersen, Bruce <hr/> Contributor address; City; State; Zip Code Sunnyvale, CA 94089-4619	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedersen, Bruce <hr/> Contributor address; City; State; Zip Code Sunnyvale, CA 94089-4619	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 591/828 Rpt: 595/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peers, Richard <hr/> 6 Contributor address; City; State; Zip Code Menlo Park, CA 94025-5855	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peirce, Mary <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34242-1317	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peirce, Mary <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34242-1317	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peirce, Mary <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34242-1317	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pekarek, Curt J. <hr/> Contributor address; City; State; Zip Code Morris, MN 56267-1027	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 592/828 Rpt: 596/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pekarek, Curt J.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Morris, MN 56267-1027	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepe, Edward M.	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Portsmouth, RI 02871-4063	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepe, Edward M.	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Portsmouth, RI 02871-4063	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepe, Edward M.	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Portsmouth, RI 02871-4063	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepe, Edward M.	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Portsmouth, RI 02871-4063	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 593/828 Rpt: 597/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pepe, Edward M.	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Portsmouth, RI 02871-4063	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perla, Israel	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Oregon House, CA 95962-8028	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perla, Israel	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Oregon House, CA 95962-8028	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perla, Israel	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Oregon House, CA 95962-8028	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perla, Israel	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Oregon House, CA 95962-8028	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 594/828 Rpt: 598/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, John <hr/> 6 Contributor address; City; State; Zip Code Pittsfield, MA 01201-8523	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pestoff, Victor <hr/> Contributor address; City; State; Zip Code Henderson, NV 89014-4045	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pestoff, Victor <hr/> Contributor address; City; State; Zip Code Henderson, NV 89014-4045	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pestoff, Victor <hr/> Contributor address; City; State; Zip Code Henderson, NV 89014-4045	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pestoff, Victor <hr/> Contributor address; City; State; Zip Code Henderson, NV 89014-4045	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 595/828 Rpt: 599/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, John <hr/> 6 Contributor address; City; State; Zip Code Saugatuck, MI 49453-9750	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, John <hr/> Contributor address; City; State; Zip Code Saugatuck, MI 49453-9750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, John <hr/> Contributor address; City; State; Zip Code Saugatuck, MI 49453-9750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, John <hr/> Contributor address; City; State; Zip Code Saugatuck, MI 49453-9750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Ronalie <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20816-2133	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 596/828 Rpt: 600/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Ronalie <hr/> 6 Contributor address; City; State; Zip Code Bethesda, MD 20816-2133	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peyton, Kathryn <hr/> Contributor address; City; State; Zip Code Penngrove, CA 94951-9744	Amount of Contribution (\$) \$208.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Jerri L. <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27410-8822	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Jerri L. <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27410-8822	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pielemeier, John <hr/> Contributor address; City; State; Zip Code Chevy Chase, MD 20815-4437	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 597/828 Rpt: 601/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pigman, William G.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Saint Petersburg, FL 33704-1203	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pigman, William G.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Saint Petersburg, FL 33704-1203	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pigman, William G.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Saint Petersburg, FL 33704-1203	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pigman, William G.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Saint Petersburg, FL 33704-1203	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pigman, William G.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Saint Petersburg, FL 33704-1203	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 598/828 Rpt: 602/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pigman, William G.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Saint Petersburg, FL 33704-1203	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitcher, Catherine	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Silverdale, WA 98383-8311	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Player, Shirley	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Allen, TX 75013-4825	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pletta, John D.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springfield, OR 97477-1594	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pletta, John D.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springfield, OR 97477-1594	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 599/828 Rpt: 603/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pletta, John D.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Springfield, OR 97477-1594	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pletta, John D.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springfield, OR 97477-1594	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pletta, John D.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springfield, OR 97477-1594	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pletta, John D.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Springfield, OR 97477-1594	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plowman, Michael	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Harrisburg, NC 28075-7410	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 600/828 Rpt: 604/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plowman, Michael <hr/> 6 Contributor address; City; State; Zip Code Harrisburg, NC 28075-7410	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polikoff, Alexander <hr/> Contributor address; City; State; Zip Code Keene, NH 03431-4241	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polikoff, Alexander <hr/> Contributor address; City; State; Zip Code Keene, NH 03431-4241	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poss, Richard <hr/> Contributor address; City; State; Zip Code De Pere, WI 54115-1668	Amount of Contribution (\$) \$31.41
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poss, Richard <hr/> Contributor address; City; State; Zip Code De Pere, WI 54115-1668	Amount of Contribution (\$) \$31.41
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 601/828 Rpt: 605/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poss, Richard <hr/> 6 Contributor address; City; State; Zip Code De Pere, WI 54115-1668	7 Amount of Contribution (\$) \$31.41
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poss, Richard <hr/> Contributor address; City; State; Zip Code De Pere, WI 54115-1668	Amount of Contribution (\$) \$31.41
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poulton, Marijane <hr/> Contributor address; City; State; Zip Code Trinidad, CA 95570-0649	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poulton, Marijane <hr/> Contributor address; City; State; Zip Code Trinidad, CA 95570-0649	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pound, Renee <hr/> Contributor address; City; State; Zip Code Concord, CA 94518-3801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 602/828 Rpt: 606/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pound, Renee <hr/> 6 Contributor address; City; State; Zip Code Concord, CA 94518-3801	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pound, Renee <hr/> Contributor address; City; State; Zip Code Concord, CA 94518-3801	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pound, Renee <hr/> Contributor address; City; State; Zip Code Concord, CA 94518-3801	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pound, Renee <hr/> Contributor address; City; State; Zip Code Concord, CA 94518-3801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pound, Renee <hr/> Contributor address; City; State; Zip Code Concord, CA 94518-3801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 603/828 Rpt: 607/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pound, Renee <hr/> 6 Contributor address; City; State; Zip Code Concord, CA 94518-3801	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Maureen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Maureen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Maureen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Maureen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 604/828 Rpt: 608/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pranzatelli, Beverly <hr/> 6 Contributor address; City; State; Zip Code Bound Brook, NJ 08805-1703	7 Amount of Contribution (\$) \$33.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pranzatelli, Beverly <hr/> Contributor address; City; State; Zip Code Bound Brook, NJ 08805-1703	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pranzatelli, Beverly <hr/> Contributor address; City; State; Zip Code Bound Brook, NJ 08805-1703	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pranzatelli, Beverly <hr/> Contributor address; City; State; Zip Code Bound Brook, NJ 08805-1703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prato, Carol <hr/> Contributor address; City; State; Zip Code Oak Harbor, WA 98277-4820	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 605/828 Rpt: 609/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prato, Carol <hr/> 6 Contributor address; City; State; Zip Code Oak Harbor, WA 98277-4820	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Irene <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95821-2930	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Irene <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95821-2930	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Jeanine <hr/> Contributor address; City; State; Zip Code Germantown, TN 38138-6272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Jeanine <hr/> Contributor address; City; State; Zip Code Germantown, TN 38138-6272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 606/828 Rpt: 610/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Martha <hr/> 6 Contributor address; City; State; Zip Code Bellingham, WA 98229-5703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Martha <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98229-5703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Martha <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98229-5703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Martha <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98229-5703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Steve <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530-3160	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 607/828 Rpt: 611/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Steve <hr/> 6 Contributor address; City; State; Zip Code El Cerrito, CA 94530-3160	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Steve <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530-3160	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Steve <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530-3160	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prichard, Roger <hr/> Contributor address; City; State; Zip Code Riverton, NJ 08077-1146	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proud, Danny <hr/> Contributor address; City; State; Zip Code Madison, WI 53705-2622	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 608/828 Rpt: 612/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proud, Danny <hr/> 6 Contributor address; City; State; Zip Code Madison, WI 53705-2622	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proud, Danny <hr/> Contributor address; City; State; Zip Code Madison, WI 53705-2622	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proud, Danny <hr/> Contributor address; City; State; Zip Code Madison, WI 53705-2622	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proud, Danny <hr/> Contributor address; City; State; Zip Code Madison, WI 53705-2622	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proud, Danny <hr/> Contributor address; City; State; Zip Code Madison, WI 53705-2622	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 609/828 Rpt: 613/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proud, Danny <hr/> 6 Contributor address; City; State; Zip Code Madison, WI 53705-2622	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proud, Danny <hr/> Contributor address; City; State; Zip Code Madison, WI 53705-2622	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pujet, Heather <hr/> Contributor address; City; State; Zip Code Boulder, CO 80305-6354	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purcell, Elizabeth <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95033-8272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purcell, Elizabeth <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95033-8272	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 610/828 Rpt: 614/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purcell, Lennox <hr/> 6 Contributor address; City; State; Zip Code Escondido, CA 92026-1413	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purcell, Lennox <hr/> Contributor address; City; State; Zip Code Escondido, CA 92026-1413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purcell, Lennox <hr/> Contributor address; City; State; Zip Code Escondido, CA 92026-1413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purcell, Lennox <hr/> Contributor address; City; State; Zip Code Escondido, CA 92026-1413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radford, Janet <hr/> Contributor address; City; State; Zip Code Glide, OR 97443-0182	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 611/828 Rpt: 615/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radford, Janet <hr/> 6 Contributor address; City; State; Zip Code Glide, OR 97443-0182	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rae, Judy <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-2117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rae, Judy <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-2117	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rae, Judy <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-2117	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rae, Judy <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-2117	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 612/828 Rpt: 616/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rae, Judy <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20016-2117	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raithel, Janice C. <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711-5040	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rampersad, Arvin <hr/> Contributor address; City; State; Zip Code Jackson Heights, NY 11372-4800	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Herschel <hr/> Contributor address; City; State; Zip Code Parker, CO 80134-5933	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Herschel <hr/> Contributor address; City; State; Zip Code Parker, CO 80134-5933	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 613/828 Rpt: 617/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Herschel <hr/> 6 Contributor address; City; State; Zip Code Parker, CO 80134-5933	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall, Elizabeth <hr/> Contributor address; City; State; Zip Code Williston, VT 05495-7523	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranelletti, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95219-1930	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranelletti, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95219-1930	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranelletti, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95219-1930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 614/828 Rpt: 618/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranelletti, Barbara <hr/> 6 Contributor address; City; State; Zip Code Stockton, CA 95219-1930	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranelletti, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95219-1930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranelletti, Barbara <hr/> Contributor address; City; State; Zip Code Stockton, CA 95219-1930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rappaport, Joan <hr/> Contributor address; City; State; Zip Code Riverside, IL 60546-2644	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rappaport, Joan <hr/> Contributor address; City; State; Zip Code Riverside, IL 60546-2644	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 615/828 Rpt: 619/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rappaport, Joan <hr/> 6 Contributor address; City; State; Zip Code Riverside, IL 60546-2644	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rappaport, Joan <hr/> Contributor address; City; State; Zip Code Riverside, IL 60546-2644	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rappaport, Joan <hr/> Contributor address; City; State; Zip Code Riverside, IL 60546-2644	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rappaport, Joan <hr/> Contributor address; City; State; Zip Code Riverside, IL 60546-2644	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Bonnie <hr/> Contributor address; City; State; Zip Code Portland, OR 97212-4252	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 616/828 Rpt: 620/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97212-4252	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ream, Kathleen <hr/> Contributor address; City; State; Zip Code Placerville, CO 81430	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ream, Kathleen <hr/> Contributor address; City; State; Zip Code Placerville, CO 81430	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ream, Kathleen <hr/> Contributor address; City; State; Zip Code Placerville, CO 81430	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reames, Sherry <hr/> Contributor address; City; State; Zip Code Madison, WI 53726-5348	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 617/828 Rpt: 621/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Record, Tom <hr/> 6 Contributor address; City; State; Zip Code Fitchburg, WI 53711-5846	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Record, Tom <hr/> Contributor address; City; State; Zip Code Fitchburg, WI 53711-5846	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Record, Tom <hr/> Contributor address; City; State; Zip Code Fitchburg, WI 53711-5846	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redd, Jacquelyn <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20905-3819	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redd, Jacquelyn <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20905-3819	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 618/828 Rpt: 622/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redd, Jacquelyn <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20905-3819	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redd, Jacquelyn <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20905-3819	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rees, Rick <hr/> Contributor address; City; State; Zip Code Portland, OR 97225-2107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rees, Rick <hr/> Contributor address; City; State; Zip Code Portland, OR 97225-2107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reily, Katie <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516-8132	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 619/828 Rpt: 623/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reily, Katie <hr/> 6 Contributor address; City; State; Zip Code Chapel Hill, NC 27516-8132	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reissman, David <hr/> Contributor address; City; State; Zip Code Somerset, NJ 08873-7427	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reissman, David <hr/> Contributor address; City; State; Zip Code Somerset, NJ 08873-7427	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reissman, David <hr/> Contributor address; City; State; Zip Code Somerset, NJ 08873-7427	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rennie, Martha <hr/> Contributor address; City; State; Zip Code Cromwell, CT 06416-1558	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 620/828 Rpt: 624/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rennie, Martha <hr/> 6 Contributor address; City; State; Zip Code Cromwell, CT 06416-1558	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rennie, Martha <hr/> Contributor address; City; State; Zip Code Cromwell, CT 06416-1558	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rennie, Martha <hr/> Contributor address; City; State; Zip Code Cromwell, CT 06416-1558	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rennie, Martha <hr/> Contributor address; City; State; Zip Code Cromwell, CT 06416-1558	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Repeta, Lawrence <hr/> Contributor address; City; State; Zip Code Seattle, WA 98115-7234	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 621/828 Rpt: 625/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Replogle, Michael <hr/> 6 Contributor address; City; State; Zip Code Arnold, MD 21012-1004	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Replogle, Michael <hr/> Contributor address; City; State; Zip Code Arnold, MD 21012-1004	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Richard <hr/> Contributor address; City; State; Zip Code Morristown, NJ 07960-6965	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Richard <hr/> Contributor address; City; State; Zip Code Morristown, NJ 07960-6965	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Richard <hr/> Contributor address; City; State; Zip Code Morristown, NJ 07960-6965	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 622/828 Rpt: 626/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Rick <hr/> 6 Contributor address; City; State; Zip Code Wake Forest, NC 27587-1858	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Diane <hr/> Contributor address; City; State; Zip Code Chicago, IL 60626-4519	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Diane <hr/> Contributor address; City; State; Zip Code Chicago, IL 60626-4519	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Diane <hr/> Contributor address; City; State; Zip Code Chicago, IL 60626-4519	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Diane <hr/> Contributor address; City; State; Zip Code Chicago, IL 60626-4519	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 623/828 Rpt: 627/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rickert, Allen <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98103-4206	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retailer		9 Employer (See Instructions) Top Ten Toys Inc.
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridge, Kathleen F. <hr/> Contributor address; City; State; Zip Code Charlotte, VT 05445-9305	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridge, Kathleen F. <hr/> Contributor address; City; State; Zip Code Charlotte, VT 05445-9305	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritchie, John <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-6127	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritchie, John <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20817-6127	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 624/828 Rpt: 628/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Tom <hr/> 6 Contributor address; City; State; Zip Code Oracle, AZ 85623-1020	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Tom <hr/> Contributor address; City; State; Zip Code Oracle, AZ 85623-1020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Mark <hr/> Contributor address; City; State; Zip Code Tustin, CA 92782-4334	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Celmol Inc
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Martin <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02142-1239	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Martin <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02142-1239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 625/828 Rpt: 629/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Martin	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Cambridge, MA 02142-1239		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Martin	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Cambridge, MA 02142-1239		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Barrett	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code West Lafayette, IN 47996-2346		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Joann	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Arlington, MA 02476-6409		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Joann	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Arlington, MA 02476-6409		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 626/828 Rpt: 630/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Joann <hr/> 6 Contributor address; City; State; Zip Code Arlington, MA 02476-6409	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Scott <hr/> Contributor address; City; State; Zip Code Sausalito, CA 94965-1502	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Scott <hr/> Contributor address; City; State; Zip Code Sausalito, CA 94965-1502	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Thomas <hr/> Contributor address; City; State; Zip Code Dayton, OH 45406-5118	Amount of Contribution (\$) \$33.33
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Thomas <hr/> Contributor address; City; State; Zip Code Dayton, OH 45406-5118	Amount of Contribution (\$) \$33.33
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 627/828 Rpt: 631/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Thomas	7 Amount of Contribution (\$) \$33.33
6 Contributor address; City; State; Zip Code Dayton, OH 45406-5118		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Thomas	Amount of Contribution (\$) \$33.33
Contributor address; City; State; Zip Code Dayton, OH 45406-5118		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodammer, John	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Newark, DE 19711-4107		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodammer, John	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Newark, DE 19711-4107		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodammer, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Newark, DE 19711-4107		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 628/828 Rpt: 632/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rode, Monica <hr/> 6 Contributor address; City; State; Zip Code Costa Mesa, CA 92627-5424	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rode, Monica <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92627-5424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rode, Monica <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92627-5424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rode, Monica <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92627-5424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Rose <hr/> Contributor address; City; State; Zip Code Rockville, MD 20852-4351	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 629/828 Rpt: 633/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> 6 Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 630/828 Rpt: 634/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> 6 Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 631/828 Rpt: 635/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Ken <hr/> 6 Contributor address; City; State; Zip Code Menlo Park, CA 94025-6337	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-1301	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-1301	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-1301	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-1301	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 632/828 Rpt: 636/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Gerald <hr/> 6 Contributor address; City; State; Zip Code Midway, UT 84049-6962	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rollins, Muriel <hr/> Contributor address; City; State; Zip Code Pinole, CA 94564-2382	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rollins, Muriel <hr/> Contributor address; City; State; Zip Code Pinole, CA 94564-2382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rollins, Muriel <hr/> Contributor address; City; State; Zip Code Pinole, CA 94564-2382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rollins, Muriel <hr/> Contributor address; City; State; Zip Code Pinole, CA 94564-2382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 633/828 Rpt: 637/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rollins, Muriel <hr/> 6 Contributor address; City; State; Zip Code Pinole, CA 94564-2382	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roper, Valerie <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66049-4776	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roper, Valerie <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66049-4776	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roper, Valerie <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66049-4776	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roper, Valerie <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66049-4776	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 634/828 Rpt: 638/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenbaum, Alan <hr/> 6 Contributor address; City; State; Zip Code Chapel Hill, NC 27517-9120	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenbaum, Alan <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-9120	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenbaum, Alan <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27517-9120	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenfeld, William <hr/> Contributor address; City; State; Zip Code Lexington, MA 02420-2340	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rothhouse, Robert <hr/> Contributor address; City; State; Zip Code Egg Harbor Township, NJ 08234-9660	Amount of Contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions) Financial Consultant		Employer (See Instructions) Benjamin F. Edwards Co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 635/828 Rpt: 639/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubenstein, Susan <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11231-4906	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubinstein, Michael <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-1395	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubinstein, Michael <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-1395	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubinstein, Michael <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-1395	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubinstein, Michael <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-1395	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 636/828 Rpt: 640/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudolf, Rich <hr/> 6 Contributor address; City; State; Zip Code Valley Center, CA 92082-5263	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudolph, Sharon <hr/> Contributor address; City; State; Zip Code Elgin, IL 60124-4331	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudolph, Sharon <hr/> Contributor address; City; State; Zip Code Elgin, IL 60124-4331	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudolph, Sharon <hr/> Contributor address; City; State; Zip Code Elgin, IL 60124-4331	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rugg, Allen <hr/> Contributor address; City; State; Zip Code Chilmark, MA 02535-0124	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 637/828 Rpt: 641/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruhe, Mark <hr/> 6 Contributor address; City; State; Zip Code Naples, FL 34102-5176	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Runyon, Judith <hr/> Contributor address; City; State; Zip Code Olympia, WA 98513-4261	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Runyon, Judith <hr/> Contributor address; City; State; Zip Code Olympia, WA 98513-4261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John <hr/> Contributor address; City; State; Zip Code Manchester, CT 06042-3533	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John <hr/> Contributor address; City; State; Zip Code Manchester, CT 06042-3533	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 638/828 Rpt: 642/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Manchester, CT 06042-3533		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Manchester, CT 06042-3533		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Manchester, CT 06042-3533		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Manchester, CT 06042-3533		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Manchester, CT 06042-3533		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 639/828 Rpt: 643/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John <hr/> 6 Contributor address; City; State; Zip Code Manchester, CT 06042-3533	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John <hr/> Contributor address; City; State; Zip Code Manchester, CT 06042-3533	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, John <hr/> Contributor address; City; State; Zip Code Manchester, CT 06042-3533	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Kevin <hr/> Contributor address; City; State; Zip Code New Rochelle, NY 10804-3415	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Kevin <hr/> Contributor address; City; State; Zip Code New Rochelle, NY 10804-3415	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 640/828 Rpt: 644/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Kevin <hr/> 6 Contributor address; City; State; Zip Code New Rochelle, NY 10804-3415	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> Contributor address; City; State; Zip Code Phoenix, OR 97535-5722	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> Contributor address; City; State; Zip Code Phoenix, OR 97535-5722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> Contributor address; City; State; Zip Code Phoenix, OR 97535-5722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> Contributor address; City; State; Zip Code Phoenix, OR 97535-5722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 641/828 Rpt: 645/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> 6 Contributor address; City; State; Zip Code Phoenix, OR 97535-5722	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> Contributor address; City; State; Zip Code Phoenix, OR 97535-5722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Michael <hr/> Contributor address; City; State; Zip Code Phoenix, OR 97535-5722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Ned <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91105-2177	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Ned <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91105-2177	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 642/828 Rpt: 646/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Vincent J. <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02111-5103	7 Amount of Contribution (\$) \$100,000.00
8 Principal occupation / Job title (See Instructions) Founder		9 Employer (See Instructions) Schooner Capital
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saavedra, Carmen <hr/> Contributor address; City; State; Zip Code La Canada Flintridge, CA 91011-2828	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saavedra, Carmen <hr/> Contributor address; City; State; Zip Code La Canada Flintridge, CA 91011-2828	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saavedra, Carmen <hr/> Contributor address; City; State; Zip Code La Canada Flintridge, CA 91011-2828	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saavedra, Carmen <hr/> Contributor address; City; State; Zip Code La Canada Flintridge, CA 91011-2828	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 643/828 Rpt: 647/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saavedra, Carmen	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code La Canada Flintridge, CA 91011-2828	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saba, Julia	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Berwyn Heights, MD 20740-4311	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saba, Julia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Berwyn Heights, MD 20740-4311	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saba, Julia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Berwyn Heights, MD 20740-4311	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saba, Julia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Berwyn Heights, MD 20740-4311	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 644/828 Rpt: 648/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saba, Julia <hr/> 6 Contributor address; City; State; Zip Code Berwyn Heights, MD 20740-4311	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth <hr/> Contributor address; City; State; Zip Code Golden, CO 80403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth <hr/> Contributor address; City; State; Zip Code Golden, CO 80403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth <hr/> Contributor address; City; State; Zip Code Golden, CO 80403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth <hr/> Contributor address; City; State; Zip Code Golden, CO 80403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 645/828 Rpt: 649/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Golden, CO 80403		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Golden, CO 80403		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Golden, CO 80403		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Golden, CO 80403		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Golden, CO 80403		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 646/828 Rpt: 650/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Ruth <hr/> 6 Contributor address; City; State; Zip Code Golden, CO 80403	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuelson, Martha S. <hr/> Contributor address; City; State; Zip Code West Newton, MA 02465-2308	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions) Chief Executive Officer		Employer (See Instructions) Analysis Group
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sand, Julia <hr/> Contributor address; City; State; Zip Code Saint Paul, MN 55105-2217	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Jane <hr/> Contributor address; City; State; Zip Code Jupiter, FL 33477-4107	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Debra <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705-2334	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 647/828 Rpt: 651/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Debra	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Berkeley, CA 94705-2334		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Debra	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Berkeley, CA 94705-2334		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Debra	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Berkeley, CA 94705-2334		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandler, Benjamin	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Saint Louis, MO 63124-1981		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandler, Benjamin	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Saint Louis, MO 63124-1981		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 648/828 Rpt: 652/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandler, Benjamin <hr/> 6 Contributor address; City; State; Zip Code Saint Louis, MO 63124-1981	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandler, Rick <hr/> Contributor address; City; State; Zip Code Madeira Beach, FL 33708-2724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandler, Rick <hr/> Contributor address; City; State; Zip Code Madeira Beach, FL 33708-2724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandler, Rick <hr/> Contributor address; City; State; Zip Code Madeira Beach, FL 33708-2724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandler, Rick <hr/> Contributor address; City; State; Zip Code Madeira Beach, FL 33708-2724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 649/828 Rpt: 653/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandler, Rick <hr/> 6 Contributor address; City; State; Zip Code Madeira Beach, FL 33708-2724	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandler, Rick <hr/> Contributor address; City; State; Zip Code Madeira Beach, FL 33708-2724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sands, Janeen R. <hr/> Contributor address; City; State; Zip Code Columbus, OH 43224-2059	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sands, Janeen R. <hr/> Contributor address; City; State; Zip Code Columbus, OH 43224-2059	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sands, Janeen R. <hr/> Contributor address; City; State; Zip Code Columbus, OH 43224-2059	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 650/828 Rpt: 654/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saravay, Richard <hr/> 6 Contributor address; City; State; Zip Code Katonah, NY 10536-3725	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saravay, Richard <hr/> Contributor address; City; State; Zip Code Katonah, NY 10536-3725	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saravay, Richard <hr/> Contributor address; City; State; Zip Code Katonah, NY 10536-3725	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saroukhanians, Suzi <hr/> Contributor address; City; State; Zip Code Seattle, WA 98144-3108	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saroukhanians, Suzi <hr/> Contributor address; City; State; Zip Code Seattle, WA 98144-3108	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 651/828 Rpt: 655/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saroukhanians, Suzi	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Seattle, WA 98144-3108		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saroukhanians, Suzi	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Seattle, WA 98144-3108		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saxton, Steve	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Roseville, CA 95661-3709		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saxton, Steve	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Roseville, CA 95661-3709		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saxton, Steve	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Roseville, CA 95661-3709		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 652/828 Rpt: 656/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saxton, Steve <hr/> 6 Contributor address; City; State; Zip Code Roseville, CA 95661-3709	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saxton, Steve <hr/> Contributor address; City; State; Zip Code Roseville, CA 95661-3709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayre, Lily A. <hr/> Contributor address; City; State; Zip Code Southwest Ranches, FL 33330-2404	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayre, Lily A. <hr/> Contributor address; City; State; Zip Code Southwest Ranches, FL 33330-2404	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scafidi, Damaris <hr/> Contributor address; City; State; Zip Code Riverside, CT 06878-1925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 653/828 Rpt: 657/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scafidi, Damaris <hr/> 6 Contributor address; City; State; Zip Code Riverside, CT 06878-1925	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scafidi, Damaris <hr/> Contributor address; City; State; Zip Code Riverside, CT 06878-1925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scafidi, Damaris <hr/> Contributor address; City; State; Zip Code Riverside, CT 06878-1925	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scafidi, Damaris <hr/> Contributor address; City; State; Zip Code Riverside, CT 06878-1925	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scafidi, Damaris <hr/> Contributor address; City; State; Zip Code Riverside, CT 06878-1925	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 654/828 Rpt: 658/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schair-Cardona, Erica <hr/> 6 Contributor address; City; State; Zip Code Portland, ME 04112-7235	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schair-Cardona, Erica <hr/> Contributor address; City; State; Zip Code Portland, ME 04112-7235	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schair-Cardona, Erica <hr/> Contributor address; City; State; Zip Code Portland, ME 04112-7235	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schair-Cardona, Erica <hr/> Contributor address; City; State; Zip Code Portland, ME 04112-7235	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiewe Rancourt, Darlene M. <hr/> Contributor address; City; State; Zip Code Lake Placid, FL 33852-8975	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 655/828 Rpt: 659/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiewe Rancourt, Darlene M.	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Lake Placid, FL 33852-8975	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiewe Rancourt, Darlene M.	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Lake Placid, FL 33852-8975	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiff, Nancy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Brighton, MA 02135-6376	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiff, Nancy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Brighton, MA 02135-6376	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiff, Nancy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Brighton, MA 02135-6376	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 656/828 Rpt: 660/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Joseph <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60601-8026	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Joseph <hr/> Contributor address; City; State; Zip Code Chicago, IL 60601-8026	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Joseph <hr/> Contributor address; City; State; Zip Code Chicago, IL 60601-8026	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Joseph <hr/> Contributor address; City; State; Zip Code Chicago, IL 60601-8026	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Joseph <hr/> Contributor address; City; State; Zip Code Chicago, IL 60601-8026	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 657/828 Rpt: 661/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Rebecca A.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Seattle, WA 98103-5521	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Rebecca A.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Seattle, WA 98103-5521	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Rebecca A.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Seattle, WA 98103-5521	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmutz, Eric	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Wilmington, DE 19802-1239	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmutz, Eric	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Wilmington, DE 19802-1239	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 658/828 Rpt: 662/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmutz, Eric <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19802-1239	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmutz, Eric <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19802-1239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmutz, Eric <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19802-1239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmutz, Eric <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19802-1239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmutz, Eric <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19802-1239	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 659/828 Rpt: 663/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Joseph	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Des Moines, IA 50312-3521		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Joseph	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Des Moines, IA 50312-3521		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schrader-Patton, Linda	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Bend, OR 97703-5693		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeder, Vicki	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Golden, CO 80401-7011		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeder, Vicki	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Golden, CO 80401-7011		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 660/828 Rpt: 664/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeder, Vicki <hr/> 6 Contributor address; City; State; Zip Code Golden, CO 80401-7011	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 661/828 Rpt: 665/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> 6 Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 662/828 Rpt: 666/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> 6 Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuett, Connie <hr/> Contributor address; City; State; Zip Code Spanish Springs, NV 89441-6258	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Andrew <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-4211	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Andrew <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-4211	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Andrew <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-4211	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 663/828 Rpt: 667/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Andrew <hr/> 6 Contributor address; City; State; Zip Code Santa Rosa, CA 95404-4211	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Andrew <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-4211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Andrew <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-4211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Andrew <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-4211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Andrew <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95404-4211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 664/828 Rpt: 668/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Jean F.	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Santa Rosa, CA 95403-2668	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuricht, Trudy	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Crescent City, CA 95531-8051	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuricht, Trudy	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Crescent City, CA 95531-8051	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuricht, Trudy	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Crescent City, CA 95531-8051	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuricht, Trudy	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Crescent City, CA 95531-8051	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 665/828 Rpt: 669/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuricht, Trudy <hr/> 6 Contributor address; City; State; Zip Code Crescent City, CA 95531-8051	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuricht, Trudy <hr/> Contributor address; City; State; Zip Code Crescent City, CA 95531-8051	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schussler, Michael <hr/> Contributor address; City; State; Zip Code New York, NY 10023-1248	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Ana M. <hr/> Contributor address; City; State; Zip Code Ossipee, NH 03864-7405	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Ana M. <hr/> Contributor address; City; State; Zip Code Ossipee, NH 03864-7405	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 666/828 Rpt: 670/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwarze, William <hr/> 6 Contributor address; City; State; Zip Code Wayne, PA 19087-5326	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, David <hr/> Contributor address; City; State; Zip Code Princeton, NJ 08540-3666	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scripps, Wendy <hr/> Contributor address; City; State; Zip Code New York, NY 10010-2891	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scripps, Wendy <hr/> Contributor address; City; State; Zip Code New York, NY 10010-2891	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scripps, Wendy <hr/> Contributor address; City; State; Zip Code New York, NY 10010-2891	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 667/828 Rpt: 671/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scripps, Wendy <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10010-2891	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scussel, Adreana <hr/> Contributor address; City; State; Zip Code Stafford Springs, CT 06076-1113	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scussel, Adreana <hr/> Contributor address; City; State; Zip Code Stafford Springs, CT 06076-1113	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scussel, Adreana <hr/> Contributor address; City; State; Zip Code Stafford Springs, CT 06076-1113	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scussel, Adreana <hr/> Contributor address; City; State; Zip Code Stafford Springs, CT 06076-1113	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 668/828 Rpt: 672/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaburg, Barb <hr/> 6 Contributor address; City; State; Zip Code Bellevue, WA 98008-4210	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaburg, Barb <hr/> Contributor address; City; State; Zip Code Bellevue, WA 98008-4210	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selkirk, Neil <hr/> Contributor address; City; State; Zip Code New York, NY 10011-2872	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selkirk, Neil <hr/> Contributor address; City; State; Zip Code New York, NY 10011-2872	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shachoy, Norman <hr/> Contributor address; City; State; Zip Code Marion, MA 02738-1609	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 669/828 Rpt: 673/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaeffer, David <hr/> 6 Contributor address; City; State; Zip Code Brentwood, CA 94513-5294	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaeffer, David <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-5294	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaeffer, David <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-5294	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaeffer, David <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-5294	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaeffer, David <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-5294	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 670/828 Rpt: 674/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaeffer, David <hr/> 6 Contributor address; City; State; Zip Code Brentwood, CA 94513-5294	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaeffer, David <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-5294	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaeffer, David <hr/> Contributor address; City; State; Zip Code Brentwood, CA 94513-5294	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Sandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023-5551	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Sandra <hr/> Contributor address; City; State; Zip Code New York, NY 10023-5551	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 671/828 Rpt: 675/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharman, Anne	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Philadelphia, PA 19130-3021		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharman, Anne	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Philadelphia, PA 19130-3021		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharman, Anne	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Philadelphia, PA 19130-3021		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharman, Anne	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Philadelphia, PA 19130-3021		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharman, Anne	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Philadelphia, PA 19130-3021		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 672/828 Rpt: 676/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharman, Anne <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19130-3021	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharman, Anne <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19130-3021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Jeffrey <hr/> Contributor address; City; State; Zip Code Lakewood, WA 98498-5205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Jeffrey <hr/> Contributor address; City; State; Zip Code Lakewood, WA 98498-5205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Jeffrey <hr/> Contributor address; City; State; Zip Code Lakewood, WA 98498-5205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 673/828 Rpt: 677/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharpe, Stephen <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98103-4906	7 Amount of Contribution (\$) \$199.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shecter, Barbara <hr/> Contributor address; City; State; Zip Code Denver, CO 80220-3777	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheehan, Cynthia <hr/> Contributor address; City; State; Zip Code Palmyra, NJ 08065-2538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheehan, Cynthia <hr/> Contributor address; City; State; Zip Code Palmyra, NJ 08065-2538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheehan, Cynthia <hr/> Contributor address; City; State; Zip Code Palmyra, NJ 08065-2538	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 674/828 Rpt: 678/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheehan, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Palmyra, NJ 08065-2538	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheehan, Cynthia <hr/> Contributor address; City; State; Zip Code Palmyra, NJ 08065-2538	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheridan-Stanfill, Trisha <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76133-7903	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shibata, Janis <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-2059	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) Self Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shibata, Janis <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-2059	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 675/828 Rpt: 679/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shibata, Janis <hr/> 6 Contributor address; City; State; Zip Code Chatsworth, CA 91311-2059	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Insurance Broker		9 Employer (See Instructions) Self Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shibata, Janis <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-2059	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) Self Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shibata, Janis <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-2059	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) Self Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shibata, Janis <hr/> Contributor address; City; State; Zip Code Chatsworth, CA 91311-2059	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) Self Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shifflet, Douglas <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314-2083	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 676/828 Rpt: 680/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shifflet, Douglas <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22314-2083	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Barbara <hr/> Contributor address; City; State; Zip Code Portland, OR 97239-4718	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Barbara <hr/> Contributor address; City; State; Zip Code Portland, OR 97239-4718	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Barbara <hr/> Contributor address; City; State; Zip Code Portland, OR 97239-4718	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoultz, Jan <hr/> Contributor address; City; State; Zip Code Kaneohe, HI 96744-5506	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 677/828 Rpt: 681/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shubs, Phyliss <hr/> 6 Contributor address; City; State; Zip Code Maineville, OH 45039-9362	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shutler, Robert <hr/> Contributor address; City; State; Zip Code Naples, ID 83847	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shutler, Robert <hr/> Contributor address; City; State; Zip Code Naples, ID 83847	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shutler, Robert <hr/> Contributor address; City; State; Zip Code Naples, ID 83847	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shutler, Robert <hr/> Contributor address; City; State; Zip Code Naples, ID 83847	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 678/828 Rpt: 682/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siebler, William <hr/> 6 Contributor address; City; State; Zip Code Corvallis, OR 97330-9520	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siebler, William <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330-9520	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siebler, William <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330-9520	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sieck, Charles <hr/> Contributor address; City; State; Zip Code Boca Raton, FL 33433-2367	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sieck, Charles <hr/> Contributor address; City; State; Zip Code Boca Raton, FL 33433-2367	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 679/828 Rpt: 683/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silsbee, David <hr/> 6 Contributor address; City; State; Zip Code Storrs, CT 06268-1440	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silver, Philip <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27410-5226	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silver, Philip <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27410-5226	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverstein, Sandra <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122-5781	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverstein, Sandra <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122-5781	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 680/828 Rpt: 684/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Beverly <hr/> 6 Contributor address; City; State; Zip Code Bronx, NY 10471-1507	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Beverly <hr/> Contributor address; City; State; Zip Code Bronx, NY 10471-1507	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Beverly <hr/> Contributor address; City; State; Zip Code Bronx, NY 10471-1507	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinegal, James D. (Mr.) <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98027-8990	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singer, Richard J. <hr/> Contributor address; City; State; Zip Code Narberth, PA 19072-1159	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 681/828 Rpt: 685/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singer, Richard J.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Narberth, PA 19072-1159	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singer, Richard J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Narberth, PA 19072-1159	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singer, Richard J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Narberth, PA 19072-1159	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singh, Susheela	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Metuchen, NJ 08840-2335	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singleton, Thomas	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Eustis, FL 32726-6164	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 682/828 Rpt: 686/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skellcerf, Victoria <hr/> 6 Contributor address; City; State; Zip Code Eugene, OR 97405-7016	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skellcerf, Victoria <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-7016	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skellcerf, Victoria <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-7016	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skellcerf, Victoria <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-7016	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinfill, Thomas <hr/> Contributor address; City; State; Zip Code Laguna Beach, CA 92651-4114	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 683/828 Rpt: 687/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skinfill, Thomas <hr/> 6 Contributor address; City; State; Zip Code Laguna Beach, CA 92651-4114	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slayden, Mack <hr/> Contributor address; City; State; Zip Code Savannah, GA 31419-9889	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slayden, Mack <hr/> Contributor address; City; State; Zip Code Savannah, GA 31419-9889	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slayden, Mack <hr/> Contributor address; City; State; Zip Code Savannah, GA 31419-9889	Amount of Contribution (\$) \$35.74
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slayden, Mack <hr/> Contributor address; City; State; Zip Code Savannah, GA 31419-9889	Amount of Contribution (\$) \$25.03
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 684/828 Rpt: 688/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slayden, Mack <hr/> 6 Contributor address; City; State; Zip Code Savannah, GA 31419-9889	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slayden, Mack <hr/> Contributor address; City; State; Zip Code Savannah, GA 31419-9889	Amount of Contribution (\$) \$21.96
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slayden, Mack <hr/> Contributor address; City; State; Zip Code Savannah, GA 31419-9889	Amount of Contribution (\$) \$21.84
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slayden, Mack <hr/> Contributor address; City; State; Zip Code Savannah, GA 31419-9889	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slesinger, Larry <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20816-2221	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 685/828 Rpt: 689/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slesinger, Larry <hr/> 6 Contributor address; City; State; Zip Code Bethesda, MD 20816-2221	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slifka, Richard <hr/> Contributor address; City; State; Zip Code Waltham, MA 02454-9161	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Global Petroleum Co.
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slud, Eric <hr/> Contributor address; City; State; Zip Code Potomac, MD 20854-2315	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slud, Eric <hr/> Contributor address; City; State; Zip Code Potomac, MD 20854-2315	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Small, Cheryl <hr/> Contributor address; City; State; Zip Code New York, NY 10003-6741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 686/828 Rpt: 690/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Small, Cheryl <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10003-6741	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Cherida <hr/> Contributor address; City; State; Zip Code Lafayette, CA 94549-5356	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Christopher <hr/> Contributor address; City; State; Zip Code Washington, DC 20015-2944	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Self Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Christopher <hr/> Contributor address; City; State; Zip Code Washington, DC 20015-2944	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Self Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Christopher <hr/> Contributor address; City; State; Zip Code Washington, DC 20015-2944	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 687/828 Rpt: 691/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Christopher <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20015-2944	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) Self Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Elaine <hr/> Contributor address; City; State; Zip Code Yakima, WA 98902-4146	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Elaine <hr/> Contributor address; City; State; Zip Code Yakima, WA 98902-4146	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Esca <hr/> Contributor address; City; State; Zip Code Louisville, KY 40241-1892	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Esca <hr/> Contributor address; City; State; Zip Code Louisville, KY 40241-1892	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 688/828 Rpt: 692/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Esca <hr/> 6 Contributor address; City; State; Zip Code Louisville, KY 40241-1892	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Holly <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707-1522	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Holly <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707-1522	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Holly <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707-1522	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Holly <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707-1522	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 689/828 Rpt: 693/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Santa Monica, CA 90402-2216	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Ruth <hr/> Contributor address; City; State; Zip Code Glenview, IL 60026-7773	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Steven <hr/> Contributor address; City; State; Zip Code Temple, TX 76501-1956	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Steven <hr/> Contributor address; City; State; Zip Code Temple, TX 76501-1956	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Thomas <hr/> Contributor address; City; State; Zip Code San Carlos, CA 94070-5800	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 690/828 Rpt: 694/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Thomas <hr/> 6 Contributor address; City; State; Zip Code San Carlos, CA 94070-5800	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Thomas <hr/> Contributor address; City; State; Zip Code San Carlos, CA 94070-5800	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Thomas <hr/> Contributor address; City; State; Zip Code San Carlos, CA 94070-5800	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Thomas <hr/> Contributor address; City; State; Zip Code San Carlos, CA 94070-5800	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyderman, Judith <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27514-9772	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 691/828 Rpt: 695/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyderman, Judith <hr/> 6 Contributor address; City; State; Zip Code Chapel Hill, NC 27514-9772	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyderman, Judith <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27514-9772	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobczyk, Michael <hr/> Contributor address; City; State; Zip Code Des Plaines, IL 60016-7856	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobczyk, Michael <hr/> Contributor address; City; State; Zip Code Des Plaines, IL 60016-7856	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Souerwine, David <hr/> Contributor address; City; State; Zip Code Alpharetta, GA 30004-8233	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 692/828 Rpt: 696/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Souerwine, David	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Alpharetta, GA 30004-8233		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern, Jason	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Falls Church, VA 22043-3516		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern, Jason	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Falls Church, VA 22043-3516		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern, Jason	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Falls Church, VA 22043-3516		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern, Jason	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Falls Church, VA 22043-3516		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 693/828 Rpt: 697/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Space, Judith <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19107-1126	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiegelman, Robert B. <hr/> Contributor address; City; State; Zip Code Concord, NH 03301-3002	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiegelman, Robert B. <hr/> Contributor address; City; State; Zip Code Concord, NH 03301-3002	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spottiswoode, Roger <hr/> Contributor address; City; State; Zip Code New York, NY 10029-5212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spottiswoode, Roger <hr/> Contributor address; City; State; Zip Code New York, NY 10029-5212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 694/828 Rpt: 698/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spottiswoode, Roger <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10029-5212	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spottiswoode, Roger <hr/> Contributor address; City; State; Zip Code New York, NY 10029-5212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spottiswoode, Roger <hr/> Contributor address; City; State; Zip Code New York, NY 10029-5212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spottiswoode, Roger <hr/> Contributor address; City; State; Zip Code New York, NY 10029-5212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spottiswoode, Roger <hr/> Contributor address; City; State; Zip Code New York, NY 10029-5212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 695/828 Rpt: 699/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Springstead, Teryl	7 Amount of Contribution (\$) \$601.00
6 Contributor address; City; State; Zip Code San Diego, CA 92176-6065		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprong, C.J.	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Williamsburg, MA 01096-9745		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprong, C.J.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Williamsburg, MA 01096-9745		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprong, C.J.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Williamsburg, MA 01096-9745		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprong, C.J.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Williamsburg, MA 01096-9745		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 696/828 Rpt: 700/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprong, C.J.	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Williamsburg, MA 01096-9745	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprong, C.J.	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Williamsburg, MA 01096-9745	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprong, C.J.	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Williamsburg, MA 01096-9745	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprouse, Rylie	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Madison, WI 53719-4455	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 697/828 Rpt: 701/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> 6 Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 698/828 Rpt: 702/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> 6 Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 699/828 Rpt: 703/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> 6 Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 700/828 Rpt: 704/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> 6 Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 701/828 Rpt: 705/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Charles <hr/> 6 Contributor address; City; State; Zip Code Wakefield, MA 01880-3105	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Kathi <hr/> Contributor address; City; State; Zip Code Danvers, MA 01923-1136	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Kathi <hr/> Contributor address; City; State; Zip Code Danvers, MA 01923-1136	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Kathi <hr/> Contributor address; City; State; Zip Code Danvers, MA 01923-1136	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Kathi <hr/> Contributor address; City; State; Zip Code Danvers, MA 01923-1136	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 702/828 Rpt: 706/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurr, Kathi <hr/> 6 Contributor address; City; State; Zip Code Danvers, MA 01923-1136	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stack, Thomas R. <hr/> Contributor address; City; State; Zip Code Glendale, CA 91205-3736	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stack, Thomas R. <hr/> Contributor address; City; State; Zip Code Glendale, CA 91205-3736	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stack, Thomas R. <hr/> Contributor address; City; State; Zip Code Glendale, CA 91205-3736	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staiger, Patrice <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103-7514	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 703/828 Rpt: 707/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staiger, Patrice <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98103-7514	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staiger, Patrice <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103-7514	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanko, Rosemary <hr/> Contributor address; City; State; Zip Code Brick, NJ 08723-5780	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, William <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93109-2120	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, William <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93109-2120	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 704/828 Rpt: 708/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, William <hr/> 6 Contributor address; City; State; Zip Code Santa Barbara, CA 93109-2120	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, William <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93109-2120	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, William <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93109-2120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, William <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93109-2120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starker, B. Bond <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97339-0809	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 705/828 Rpt: 709/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starker, B. Bond <hr/> 6 Contributor address; City; State; Zip Code Corvallis, OR 97339-0809	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 706/828 Rpt: 710/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> 6 Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	Amount of Contribution (\$) \$63.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	Amount of Contribution (\$) \$63.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 707/828 Rpt: 711/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> 6 Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	7 Amount of Contribution (\$) \$63.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedinger, Robin <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-1704	Amount of Contribution (\$) \$63.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steimle, Mary <hr/> Contributor address; City; State; Zip Code Rolesville, NC 27571-9250	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steimle, Mary <hr/> Contributor address; City; State; Zip Code Rolesville, NC 27571-9250	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steimle, Mary <hr/> Contributor address; City; State; Zip Code Rolesville, NC 27571-9250	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 708/828 Rpt: 712/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steimle, Mary <hr/> 6 Contributor address; City; State; Zip Code Rolesville, NC 27571-9250	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steimle, Mary <hr/> Contributor address; City; State; Zip Code Rolesville, NC 27571-9250	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steiner, Louise <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45220-1419	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steiner, Louise <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45220-1419	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steiner, Louise <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45220-1419	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 709/828 Rpt: 713/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steiner, Louise <hr/> 6 Contributor address; City; State; Zip Code Cincinnati, OH 45220-1419	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steininger, Marion P. <hr/> Contributor address; City; State; Zip Code Voorhees, NJ 08043-1813	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stensjo, Edward <hr/> Contributor address; City; State; Zip Code Harrisburg, PA 17111-7013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stensjo, Edward <hr/> Contributor address; City; State; Zip Code Harrisburg, PA 17111-7013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stensjo, Edward <hr/> Contributor address; City; State; Zip Code Harrisburg, PA 17111-7013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 710/828 Rpt: 714/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stensjo, Edward <hr/> 6 Contributor address; City; State; Zip Code Harrisburg, PA 17111-7013	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stern, Joseph <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27410-6041	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steury, Steven <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-5260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steury, Steven <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-5260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steury, Steven <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-5260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 711/828 Rpt: 715/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steury, Steven <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20016-5260	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven, Victoria <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138-1363	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven, Victoria <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138-1363	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven, Victoria <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138-1363	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven, Victoria <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138-1363	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 712/828 Rpt: 716/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Mark	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Waldorf, MD 20603-7202		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Waldorf, MD 20603-7202		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Waldorf, MD 20603-7202		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Waldorf, MD 20603-7202		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Mark	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Waldorf, MD 20603-7202		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 713/828 Rpt: 717/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Mark <hr/> 6 Contributor address; City; State; Zip Code Waldorf, MD 20603-7202	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Cora <hr/> Contributor address; City; State; Zip Code Sebastopol, CA 95472-5328	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Cora <hr/> Contributor address; City; State; Zip Code Sebastopol, CA 95472-5328	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Cora <hr/> Contributor address; City; State; Zip Code Sebastopol, CA 95472-5328	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Cora <hr/> Contributor address; City; State; Zip Code Sebastopol, CA 95472-5328	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 714/828 Rpt: 718/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Emily <hr/> 6 Contributor address; City; State; Zip Code Delmar, NY 12054-2716	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Emily <hr/> Contributor address; City; State; Zip Code Delmar, NY 12054-2716	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Frances <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20814-4732	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Frances <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20814-4732	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Frances <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20814-4732	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 715/828 Rpt: 719/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Frances <hr/> 6 Contributor address; City; State; Zip Code Bethesda, MD 20814-4732	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Frances <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20814-4732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Frances <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20814-4732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Frances <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20814-4732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Frances <hr/> Contributor address; City; State; Zip Code Bethesda, MD 20814-4732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 716/828 Rpt: 720/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jane A.	7 Amount of Contribution (\$) \$80.00
6 Contributor address; City; State; Zip Code Amarillo, TX 79106-2817		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jane A.	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Amarillo, TX 79106-2817		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jane A.	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Amarillo, TX 79106-2817		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jane A.	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Amarillo, TX 79106-2817		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jane A.	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Amarillo, TX 79106-2817		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 717/828 Rpt: 721/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jane A.	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Amarillo, TX 79106-2817	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jane A.	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Amarillo, TX 79106-2817	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stirling, Deborah	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Chesterton, IN 46304-9337	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stirling, Deborah	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Chesterton, IN 46304-9337	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 718/828 Rpt: 722/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 719/828 Rpt: 723/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 720/828 Rpt: 724/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stivers, Tim <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90036-4957	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stormsgaard, Richardt <hr/> Contributor address; City; State; Zip Code Nevada City, CA 95959-9514	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stormsgaard, Richardt <hr/> Contributor address; City; State; Zip Code Nevada City, CA 95959-9514	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stormsgaard, Richardt <hr/> Contributor address; City; State; Zip Code Nevada City, CA 95959-9514	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stormsgaard, Richardt <hr/> Contributor address; City; State; Zip Code Nevada City, CA 95959-9514	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 721/828 Rpt: 725/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stroock, Lucy <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02140-2247	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Hugh <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92627-6424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Hugh <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92627-6424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Hugh <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92627-6424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Jacqueline <hr/> Contributor address; City; State; Zip Code Seattle, WA 98109-4953	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 722/828 Rpt: 726/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Jacqueline <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98109-4953	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Jacqueline <hr/> Contributor address; City; State; Zip Code Seattle, WA 98109-4953	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> Contributor address; City; State; Zip Code Lacey, WA 98513-1708	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> Contributor address; City; State; Zip Code Lacey, WA 98513-1708	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> Contributor address; City; State; Zip Code Lacey, WA 98513-1708	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 723/828 Rpt: 727/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> 6 Contributor address; City; State; Zip Code Lacey, WA 98513-1708	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> Contributor address; City; State; Zip Code Lacey, WA 98513-1708	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> Contributor address; City; State; Zip Code Lacey, WA 98513-1708	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> Contributor address; City; State; Zip Code Lacey, WA 98513-1708	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> Contributor address; City; State; Zip Code Lacey, WA 98513-1708	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 724/828 Rpt: 728/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> 6 Contributor address; City; State; Zip Code Lacey, WA 98513-1708	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutch, Susan <hr/> Contributor address; City; State; Zip Code Galway, NY 12074-2304	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutch, Susan <hr/> Contributor address; City; State; Zip Code Galway, NY 12074-2304	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutch, Susan <hr/> Contributor address; City; State; Zip Code Galway, NY 12074-2304	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutherland, Janet <hr/> Contributor address; City; State; Zip Code Twin Lake, MI 49457-9648	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 725/828 Rpt: 729/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutherland, Janet <hr/> 6 Contributor address; City; State; Zip Code Twin Lake, MI 49457-9648	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzukamo, Karen <hr/> Contributor address; City; State; Zip Code Vadnais Heights, MN 55127-3624	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, John <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92009-9211	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, John <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92009-9211	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Jean <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406-3681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 726/828 Rpt: 730/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Jean <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55406-3681	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Jean <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406-3681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Jean <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406-3681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Jean <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406-3681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Jean <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406-3681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 727/828 Rpt: 731/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Jean <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55406-3681	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Jean <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406-3681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Jean <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406-3681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Virginia <hr/> Contributor address; City; State; Zip Code Urbandale, IA 50322-4095	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Virginia <hr/> Contributor address; City; State; Zip Code Urbandale, IA 50322-4095	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 728/828 Rpt: 732/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Virginia <hr/> 6 Contributor address; City; State; Zip Code Urbandale, IA 50322-4095	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Virginia <hr/> Contributor address; City; State; Zip Code Urbandale, IA 50322-4095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Virginia <hr/> Contributor address; City; State; Zip Code Urbandale, IA 50322-4095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Virginia <hr/> Contributor address; City; State; Zip Code Urbandale, IA 50322-4095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Virginia <hr/> Contributor address; City; State; Zip Code Urbandale, IA 50322-4095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 729/828 Rpt: 733/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Virginia	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Urbandale, IA 50322-4095		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Virginia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Urbandale, IA 50322-4095		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swinburn, Carol	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Palm Coast, FL 32137-2294		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swinburn, Carol	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Palm Coast, FL 32137-2294		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swinburn, Carol	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Palm Coast, FL 32137-2294		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 730/828 Rpt: 734/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syer, Sara <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94131-3048	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syer, Sara <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-3048	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syer, Sara <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-3048	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syer, Sara <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-3048	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syer, Sara <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-3048	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 731/828 Rpt: 735/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syer, Sara	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code San Francisco, CA 94131-3048		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syer, Sara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Francisco, CA 94131-3048		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syer, Sara	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code San Francisco, CA 94131-3048		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syer, Sara	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code San Francisco, CA 94131-3048		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE, James	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Oakland, CA 94618-1021		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 732/828 Rpt: 736/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE, James <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94618-1021	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talbot, Augusta <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114-3414	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanaka, Terrill <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94024-6155	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Carol <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-6003	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Edward <hr/> Contributor address; City; State; Zip Code Annandale, MN 55302-2465	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 733/828 Rpt: 737/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Edward <hr/> 6 Contributor address; City; State; Zip Code Annandale, MN 55302-2465	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Edward <hr/> Contributor address; City; State; Zip Code Annandale, MN 55302-2465	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Edward <hr/> Contributor address; City; State; Zip Code Annandale, MN 55302-2465	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Edward <hr/> Contributor address; City; State; Zip Code Annandale, MN 55302-2465	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, M.G. <hr/> Contributor address; City; State; Zip Code Roseville, CA 95747-8103	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 734/828 Rpt: 738/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, M.G.	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Roseville, CA 95747-8103	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, M.G.	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Roseville, CA 95747-8103	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, M.G.	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Roseville, CA 95747-8103	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templeton Sr., John	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Amherst, MA 01002-2600	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenney, Matthew	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Stamford, CT 06902-4550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 735/828 Rpt: 739/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tessman, Margo <hr/> 6 Contributor address; City; State; Zip Code Marcell, MN 56657-0175	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher, Susanne <hr/> Contributor address; City; State; Zip Code Winston Salem, NC 27127-2945	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher, Susanne <hr/> Contributor address; City; State; Zip Code Winston Salem, NC 27127-2945	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher, Susanne <hr/> Contributor address; City; State; Zip Code Winston Salem, NC 27127-2945	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher, Susanne <hr/> Contributor address; City; State; Zip Code Winston Salem, NC 27127-2945	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 736/828 Rpt: 740/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher, Susanne <hr/> 6 Contributor address; City; State; Zip Code Winston Salem, NC 27127-2945	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher, Susanne <hr/> Contributor address; City; State; Zip Code Winston Salem, NC 27127-2945	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher, Susanne <hr/> Contributor address; City; State; Zip Code Winston Salem, NC 27127-2945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Edward E. <hr/> Contributor address; City; State; Zip Code Glenview, IL 60026-5939	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Edward E. <hr/> Contributor address; City; State; Zip Code Glenview, IL 60026-5939	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 737/828 Rpt: 741/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Senfronia	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Houston, TX 77081-1246		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Senfronia	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Houston, TX 77081-1246		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Senfronia	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Houston, TX 77081-1246		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Senfronia	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Houston, TX 77081-1246		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Senfronia	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77081-1246		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 738/828 Rpt: 742/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Senfronia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77081-1246	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Senfronia <hr/> Contributor address; City; State; Zip Code Houston, TX 77081-1246	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Senfronia <hr/> Contributor address; City; State; Zip Code Houston, TX 77081-1246	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, William <hr/> Contributor address; City; State; Zip Code Los Alamitos, CA 90720-4634	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, William <hr/> Contributor address; City; State; Zip Code Los Alamitos, CA 90720-4634	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 739/828 Rpt: 743/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, William <hr/> 6 Contributor address; City; State; Zip Code Los Alamitos, CA 90720-4634	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson-Meier, Jayne <hr/> Contributor address; City; State; Zip Code Eustis, FL 32726-7150	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Ellen <hr/> Contributor address; City; State; Zip Code Granby, CT 06035-0322	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tideman, Susan <hr/> Contributor address; City; State; Zip Code Durham, NC 27705-3245	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tideman, Susan <hr/> Contributor address; City; State; Zip Code Durham, NC 27705-3245	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 740/828 Rpt: 744/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tideman, Susan <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27705-3245	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tideman, Susan <hr/> Contributor address; City; State; Zip Code Durham, NC 27705-3245	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tideman, Susan <hr/> Contributor address; City; State; Zip Code Durham, NC 27705-3245	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tigner, Maury <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-2249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tigner, Maury <hr/> Contributor address; City; State; Zip Code Ithaca, NY 14850-2249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 741/828 Rpt: 745/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Judith <hr/> 6 Contributor address; City; State; Zip Code Southport, NC 28461-7448	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilton, Robert <hr/> Contributor address; City; State; Zip Code Louisville, KY 40220-1972	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilton, Robert <hr/> Contributor address; City; State; Zip Code Louisville, KY 40220-1972	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilton, Robert <hr/> Contributor address; City; State; Zip Code Louisville, KY 40220-1972	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilton, Robert <hr/> Contributor address; City; State; Zip Code Louisville, KY 40220-1972	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 742/828 Rpt: 746/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilton, Robert <hr/> 6 Contributor address; City; State; Zip Code Louisville, KY 40220-1972	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilton, Robert <hr/> Contributor address; City; State; Zip Code Louisville, KY 40220-1972	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Title, Daena <hr/> Contributor address; City; State; Zip Code West Hollywood, CA 90046-6002	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Painter		Employer (See Instructions) Self Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Title, Daena <hr/> Contributor address; City; State; Zip Code West Hollywood, CA 90046-6002	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Painter		Employer (See Instructions) Self Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tizard, Claire <hr/> Contributor address; City; State; Zip Code College Station, TX 77840-4843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 743/828 Rpt: 747/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tizard, Claire	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code College Station, TX 77840-4843		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tizard, Claire	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code College Station, TX 77840-4843		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tizard, Claire	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code College Station, TX 77840-4843		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tizard, Claire	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code College Station, TX 77840-4843		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77096-4809		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 744/828 Rpt: 748/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096-4809	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tombes, Rob <hr/> Contributor address; City; State; Zip Code North Chesterfield, VA 23235-4248	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 745/828 Rpt: 749/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Melissa	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Takoma Park, MD 20912-4136		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Melissa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Takoma Park, MD 20912-4136		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Melissa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Takoma Park, MD 20912-4136		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Melissa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Takoma Park, MD 20912-4136		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Melissa	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Takoma Park, MD 20912-4136		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 746/828 Rpt: 750/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Melissa <hr/> 6 Contributor address; City; State; Zip Code Takoma Park, MD 20912-4136	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Melissa <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912-4136	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Melissa <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912-4136	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 747/828 Rpt: 751/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> 6 Contributor address; City; State; Zip Code Durango, CO 81301-7454	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 748/828 Rpt: 752/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> 6 Contributor address; City; State; Zip Code Durango, CO 81301-7454	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 749/828 Rpt: 753/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> 6 Contributor address; City; State; Zip Code Durango, CO 81301-7454	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torbohn, Joan <hr/> Contributor address; City; State; Zip Code Durango, CO 81301-7454	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torson, James <hr/> Contributor address; City; State; Zip Code Flagstaff, AZ 86004-1532	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tovo, Aaron <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406-1207	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 750/828 Rpt: 754/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trainer, Robert <hr/> 6 Contributor address; City; State; Zip Code Loveland, CO 80537-4472	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trainer, Robert <hr/> Contributor address; City; State; Zip Code Loveland, CO 80537-4472	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trask, Suzanne <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80524-2667	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trask, Suzanne <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80524-2667	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trask, Suzanne <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80524-2667	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 751/828 Rpt: 755/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trask, Suzanne <hr/> 6 Contributor address; City; State; Zip Code Fort Collins, CO 80524-2667	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trask, Suzanne <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80524-2667	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treiman, Donald J. <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90077-2323	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treiman, Donald J. <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90077-2323	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treiman, Donald J. <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90077-2323	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 752/828 Rpt: 756/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treiman, Donald J.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Los Angeles, CA 90077-2323	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent, Ivy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Altadena, CA 91001-4850	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent, Ivy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Altadena, CA 91001-4850	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent, Ivy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Altadena, CA 91001-4850	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent, Ivy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Altadena, CA 91001-4850	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 753/828 Rpt: 757/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent, Ivy <hr/> 6 Contributor address; City; State; Zip Code Altadena, CA 91001-4850	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent, Ivy <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001-4850	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent, Ivy <hr/> Contributor address; City; State; Zip Code Altadena, CA 91001-4850	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troik, Diana <hr/> Contributor address; City; State; Zip Code Camarillo, CA 93010-1710	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troik, Diana <hr/> Contributor address; City; State; Zip Code Camarillo, CA 93010-1710	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 754/828 Rpt: 758/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucek, Leslee <hr/> 6 Contributor address; City; State; Zip Code Franklin, NC 28744-0826	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucek, Leslee <hr/> Contributor address; City; State; Zip Code Franklin, NC 28744-0826	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Kathryn <hr/> Contributor address; City; State; Zip Code Novato, CA 94949-6129	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Kathryn <hr/> Contributor address; City; State; Zip Code Novato, CA 94949-6129	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucket, Stevens <hr/> Contributor address; City; State; Zip Code Pacific Grove, CA 93950-3867	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 755/828 Rpt: 759/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucket, Stevens <hr/> 6 Contributor address; City; State; Zip Code Pacific Grove, CA 93950-3867	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucket, Stevens <hr/> Contributor address; City; State; Zip Code Pacific Grove, CA 93950-3867	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuckman, Margareta <hr/> Contributor address; City; State; Zip Code Kennett Square, PA 19348-2014	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullis, Lynn <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-2403	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullis, Lynn <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-2403	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 756/828 Rpt: 760/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullis, Lynn <hr/> 6 Contributor address; City; State; Zip Code Eugene, OR 97405-2403	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullis, Lynn <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405-2403	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 757/828 Rpt: 761/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> 6 Contributor address; City; State; Zip Code Redlands, CA 92374-6343	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 758/828 Rpt: 762/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> 6 Contributor address; City; State; Zip Code Redlands, CA 92374-6343	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Richard <hr/> Contributor address; City; State; Zip Code Redlands, CA 92374-6343	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tumbleson, Paul <hr/> Contributor address; City; State; Zip Code Glen Ridge, NJ 07028-1720	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 759/828 Rpt: 763/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turkus, Barry <hr/> 6 Contributor address; City; State; Zip Code Los Altos, CA 94022-3712	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turkus, Barry <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022-3712	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turkus, Barry <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022-3712	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turkus, Barry <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022-3712	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sally <hr/> Contributor address; City; State; Zip Code Greenwich, CT 06830-4511	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 760/828 Rpt: 764/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sally <hr/> 6 Contributor address; City; State; Zip Code Greenwich, CT 06830-4511	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sally <hr/> Contributor address; City; State; Zip Code Greenwich, CT 06830-4511	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Eleanor B. <hr/> Contributor address; City; State; Zip Code Lenoir, NC 28645-8293	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Eleanor B. <hr/> Contributor address; City; State; Zip Code Lenoir, NC 28645-8293	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Eleanor B. <hr/> Contributor address; City; State; Zip Code Lenoir, NC 28645-8293	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 761/828 Rpt: 765/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Eleanor B.	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Lenoir, NC 28645-8293		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Eleanor B.	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lenoir, NC 28645-8293		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Eleanor B.	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lenoir, NC 28645-8293		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underdown, Eleanor B.	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lenoir, NC 28645-8293		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vagts, Kenneth	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Falls Church, VA 22043-1818		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 762/828 Rpt: 766/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vagts, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Falls Church, VA 22043-1818	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vagts, Kenneth <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22043-1818	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vagts, Kenneth <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22043-1818	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vagts, Kenneth <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22043-1818	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Letty <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106-3739	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 763/828 Rpt: 767/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Beest, Nancy D.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Shoreview, MN 55126-6015	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Beest, Nancy D.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Shoreview, MN 55126-6015	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Beest, Nancy D.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Shoreview, MN 55126-6015	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Beest, Nancy D.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Shoreview, MN 55126-6015	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, John	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Woodland Park, CO 80863-9615	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 764/828 Rpt: 768/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, John <hr/> 6 Contributor address; City; State; Zip Code Woodland Park, CO 80863-9615	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, John <hr/> Contributor address; City; State; Zip Code Woodland Park, CO 80863-9615	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, John <hr/> Contributor address; City; State; Zip Code Woodland Park, CO 80863-9615	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, John <hr/> Contributor address; City; State; Zip Code Woodland Park, CO 80863-9615	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vance, John <hr/> Contributor address; City; State; Zip Code Woodland Park, CO 80863-9615	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 765/828 Rpt: 769/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderploeg, Martin	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Martin, SD 57551-5930		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varian, Lee C.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Princeton, NJ 08540-3956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varian, Lee C.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Princeton, NJ 08540-3956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varian, Lee C.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Princeton, NJ 08540-3956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varian, Lee C.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Princeton, NJ 08540-3956		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 766/828 Rpt: 770/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verbeten, Nileen <hr/> 6 Contributor address; City; State; Zip Code Sacramento, CA 95816-3417	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verbeten, Nileen <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95816-3417	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verbeten, Nileen <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95816-3417	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verbeten, Nileen <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95816-3417	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vercoe, Elizabeth <hr/> Contributor address; City; State; Zip Code Rockport, MA 01966-1353	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 767/828 Rpt: 771/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vercoe, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Rockport, MA 01966-1353	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vercoe, Elizabeth <hr/> Contributor address; City; State; Zip Code Rockport, MA 01966-1353	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verderber, Elsa <hr/> Contributor address; City; State; Zip Code East Lansing, MI 48823-4751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verderber, Elsa <hr/> Contributor address; City; State; Zip Code East Lansing, MI 48823-4751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verderber, Elsa <hr/> Contributor address; City; State; Zip Code East Lansing, MI 48823-4751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 768/828 Rpt: 772/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verderber, Elsa <hr/> 6 Contributor address; City; State; Zip Code East Lansing, MI 48823-4751	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verderber, Elsa <hr/> Contributor address; City; State; Zip Code East Lansing, MI 48823-4751	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verderber, Elsa <hr/> Contributor address; City; State; Zip Code East Lansing, MI 48823-4751	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Jennifer <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19146-4825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Jennifer <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19146-4825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 769/828 Rpt: 773/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19146-4825	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Jennifer <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19146-4825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volk, Robert <hr/> Contributor address; City; State; Zip Code San Marino, CA 91108-1140	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volk, Robert <hr/> Contributor address; City; State; Zip Code San Marino, CA 91108-1140	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volk, Robert <hr/> Contributor address; City; State; Zip Code San Marino, CA 91108-1140	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 770/828 Rpt: 774/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volk, Robert 6 Contributor address; City; State; Zip Code San Marino, CA 91108-1140	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 771/828 Rpt: 775/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> 6 Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 772/828 Rpt: 776/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> 6 Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 773/828 Rpt: 777/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tarencia <hr/> 6 Contributor address; City; State; Zip Code New Carrollton, MD 20784-3630	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Ann <hr/> Contributor address; City; State; Zip Code Glendale, AZ 85308-9487	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Ann <hr/> Contributor address; City; State; Zip Code Glendale, AZ 85308-9487	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Ann <hr/> Contributor address; City; State; Zip Code Glendale, AZ 85308-9487	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Ann <hr/> Contributor address; City; State; Zip Code Glendale, AZ 85308-9487	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 774/828 Rpt: 778/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wahl, Stanley <hr/> 6 Contributor address; City; State; Zip Code Santa Rosa, CA 95406-1566	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wahl, Stanley <hr/> Contributor address; City; State; Zip Code Santa Rosa, CA 95406-1566	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 775/828 Rpt: 779/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 776/828 Rpt: 780/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia <hr/> Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 777/828 Rpt: 781/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wain, Cynthia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Los Altos Hills, CA 94022-2512		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 778/828 Rpt: 782/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainstein, Michelle <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98107-2007	7 Amount of Contribution (\$) \$33.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainstein, Michelle <hr/> Contributor address; City; State; Zip Code Seattle, WA 98107-2007	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainstein, Michelle <hr/> Contributor address; City; State; Zip Code Seattle, WA 98107-2007	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainstein, Michelle <hr/> Contributor address; City; State; Zip Code Seattle, WA 98107-2007	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 779/828 Rpt: 783/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> 6 Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 780/828 Rpt: 784/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> 6 Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 781/828 Rpt: 785/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> 6 Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 782/828 Rpt: 786/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> 6 Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 783/828 Rpt: 787/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> 6 Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 784/828 Rpt: 788/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> 6 Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 785/828 Rpt: 789/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> 6 Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walk, Cynthia <hr/> Contributor address; City; State; Zip Code La Jolla, CA 92037-7340	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 786/828 Rpt: 790/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Dan <hr/> 6 Contributor address; City; State; Zip Code Cincinnati, OH 45211-4845	7 Amount of Contribution (\$) \$337.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Dan <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45211-4845	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Sara <hr/> Contributor address; City; State; Zip Code Augusta, MT 59410-0373	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Sara <hr/> Contributor address; City; State; Zip Code Augusta, MT 59410-0373	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Sara <hr/> Contributor address; City; State; Zip Code Augusta, MT 59410-0373	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 787/828 Rpt: 791/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 788/828 Rpt: 792/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Elizabeth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Jacksonville, FL 32210-2202		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 789/828 Rpt: 793/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, David <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731-4226	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, David <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, David <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wartman, Matthew <hr/> Contributor address; City; State; Zip Code Wisconsin Rapids, WI 54494-1852	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wartman, Matthew <hr/> Contributor address; City; State; Zip Code Wisconsin Rapids, WI 54494-1852	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 790/828 Rpt: 794/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wartman, Matthew <hr/> 6 Contributor address; City; State; Zip Code Wisconsin Rapids, WI 54494-1852	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watford, Nancy <hr/> Contributor address; City; State; Zip Code South Riding, VA 20152-1788	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watford, Nancy <hr/> Contributor address; City; State; Zip Code South Riding, VA 20152-1788	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watford, Nancy <hr/> Contributor address; City; State; Zip Code South Riding, VA 20152-1788	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watford, Nancy <hr/> Contributor address; City; State; Zip Code South Riding, VA 20152-1788	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 791/828 Rpt: 795/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Carla <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27616-5400	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Sherrill <hr/> Contributor address; City; State; Zip Code Skokie, IL 60076-3515	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Catherine <hr/> Contributor address; City; State; Zip Code Bozeman, MT 59715-5982	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Catherine <hr/> Contributor address; City; State; Zip Code Bozeman, MT 59715-5982	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Catherine <hr/> Contributor address; City; State; Zip Code Bozeman, MT 59715-5982	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 792/828 Rpt: 796/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Catherine <hr/> 6 Contributor address; City; State; Zip Code Bozeman, MT 59715-5982	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weflen, Marleen <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85212-8439	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weflen, Marleen <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85212-8439	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weflen, Marleen <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85212-8439	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weflen, Marleen <hr/> Contributor address; City; State; Zip Code Mesa, AZ 85212-8439	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 793/828 Rpt: 797/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wegmann, Karen B. <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94109-1230	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weih, Phyllis <hr/> Contributor address; City; State; Zip Code Portland, OR 97222-8277	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weih, Phyllis <hr/> Contributor address; City; State; Zip Code Portland, OR 97222-8277	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisberg, Cheryl <hr/> Contributor address; City; State; Zip Code Guilford, CT 06437-3496	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisberg, Cheryl <hr/> Contributor address; City; State; Zip Code Guilford, CT 06437-3496	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 794/828 Rpt: 798/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisberg, Cheryl <hr/> 6 Contributor address; City; State; Zip Code Guilford, CT 06437-3496	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisberg, Cheryl <hr/> Contributor address; City; State; Zip Code Guilford, CT 06437-3496	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisberg, Cheryl <hr/> Contributor address; City; State; Zip Code Guilford, CT 06437-3496	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisberg, Cheryl <hr/> Contributor address; City; State; Zip Code Guilford, CT 06437-3496	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisberg, Cheryl <hr/> Contributor address; City; State; Zip Code Guilford, CT 06437-3496	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 795/828 Rpt: 799/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Howard <hr/> 6 Contributor address; City; State; Zip Code Madison, CT 06443-3006	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Howard <hr/> Contributor address; City; State; Zip Code Madison, CT 06443-3006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Howard <hr/> Contributor address; City; State; Zip Code Madison, CT 06443-3006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wempner, Gerald <hr/> Contributor address; City; State; Zip Code Plains, MT 59859-9354	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wempner, Gerald <hr/> Contributor address; City; State; Zip Code Plains, MT 59859-9354	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 796/828 Rpt: 800/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Randolph <hr/> 6 Contributor address; City; State; Zip Code Chattanooga, TN 37421-4126	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Randolph <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421-4126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Randolph <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421-4126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Randolph <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421-4126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Randolph <hr/> Contributor address; City; State; Zip Code Chattanooga, TN 37421-4126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 797/828 Rpt: 801/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Tim <hr/> 6 Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Tim <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Tim <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Tim <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Tim <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 798/828 Rpt: 802/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Tim <hr/> 6 Contributor address; City; State; Zip Code Albuquerque, NM 87110-7715	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whalin, Michael <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55410-2636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whalin, Michael <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55410-2636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whalin, Michael <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55410-2636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whalin, Michael <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55410-2636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 799/828 Rpt: 803/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whalin, Michael <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55410-2636	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whipple, Katherine <hr/> Contributor address; City; State; Zip Code Kensington, MD 20895-2614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whipple, Katherine <hr/> Contributor address; City; State; Zip Code Kensington, MD 20895-2614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whipple, Katherine <hr/> Contributor address; City; State; Zip Code Kensington, MD 20895-2614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whipple, Katherine <hr/> Contributor address; City; State; Zip Code Kensington, MD 20895-2614	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 800/828 Rpt: 804/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Patricia S. <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613-6790	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Patricia S. <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-6790	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Patricia S. <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-6790	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Patricia S. <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-6790	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Patricia S. <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-6790	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 801/828 Rpt: 805/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Patricia S. <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613-6790	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Stephen J. <hr/> Contributor address; City; State; Zip Code Culver City, CA 90230-4942	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Stephen J. <hr/> Contributor address; City; State; Zip Code Culver City, CA 90230-4942	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White Jr., Robert C. <hr/> Contributor address; City; State; Zip Code Renton, WA 98056-2828	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White Jr., Robert C. <hr/> Contributor address; City; State; Zip Code Renton, WA 98056-2828	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 802/828 Rpt: 806/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiting, Jo L. <hr/> 6 Contributor address; City; State; Zip Code Aurora, CO 80014-1866	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Shirley <hr/> Contributor address; City; State; Zip Code New York, NY 10012-2006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Shirley <hr/> Contributor address; City; State; Zip Code New York, NY 10012-2006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Chris <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126-1150	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Chris <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126-1150	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 803/828 Rpt: 807/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Chris <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92126-1150	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Chris <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126-1150	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Chris <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126-1150	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Chris <hr/> Contributor address; City; State; Zip Code San Diego, CA 92126-1150	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> Contributor address; City; State; Zip Code Waldport, OR 97394-0734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 804/828 Rpt: 808/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> 6 Contributor address; City; State; Zip Code Waldport, OR 97394-0734	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> Contributor address; City; State; Zip Code Waldport, OR 97394-0734	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> Contributor address; City; State; Zip Code Waldport, OR 97394-0734	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> Contributor address; City; State; Zip Code Waldport, OR 97394-0734	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> Contributor address; City; State; Zip Code Waldport, OR 97394-0734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 805/828 Rpt: 809/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> 6 Contributor address; City; State; Zip Code Waldport, OR 97394-0734	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> Contributor address; City; State; Zip Code Waldport, OR 97394-0734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> Contributor address; City; State; Zip Code Waldport, OR 97394-0734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wikler, Joan <hr/> Contributor address; City; State; Zip Code Waldport, OR 97394-0734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Alvin T. <hr/> Contributor address; City; State; Zip Code Hudson, MA 01749-2756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 806/828 Rpt: 810/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Alvin T.	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Hudson, MA 01749-2756	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Alvin T.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hudson, MA 01749-2756	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Alvin T.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hudson, MA 01749-2756	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Alvin T.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hudson, MA 01749-2756	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Alvin T.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hudson, MA 01749-2756	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 807/828 Rpt: 811/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Alvin T.	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Hudson, MA 01749-2756	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Alvin T.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hudson, MA 01749-2756	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Roger	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Gig Harbor, WA 98332-7007	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Cheryl	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Los Angeles, CA 90009-1211	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Cheryl	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Los Angeles, CA 90009-1211	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 808/828 Rpt: 812/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Cheryl <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90009-1211	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Joyce <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95945-5506	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Joyce <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95945-5506	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Joyce <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95945-5506	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Joyce <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95945-5506	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 809/828 Rpt: 813/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Joyce <hr/> 6 Contributor address; City; State; Zip Code Grass Valley, CA 95945-5506	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Roger <hr/> Contributor address; City; State; Zip Code Bar Harbor, ME 04609-1407	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Roger <hr/> Contributor address; City; State; Zip Code Bar Harbor, ME 04609-1407	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Roger <hr/> Contributor address; City; State; Zip Code Bar Harbor, ME 04609-1407	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Roger <hr/> Contributor address; City; State; Zip Code Bar Harbor, ME 04609-1407	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 810/828 Rpt: 814/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Roger <hr/> 6 Contributor address; City; State; Zip Code Bar Harbor, ME 04609-1407	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Roger <hr/> Contributor address; City; State; Zip Code Bar Harbor, ME 04609-1407	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Roger <hr/> Contributor address; City; State; Zip Code Bar Harbor, ME 04609-1407	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Roger <hr/> Contributor address; City; State; Zip Code Bar Harbor, ME 04609-1407	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393-2166	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 811/828 Rpt: 815/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77393-2166	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393-2166	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393-2166	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393-2166	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393-2166	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 812/828 Rpt: 816/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77393-2166	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393-2166	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393-2166	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393-2166	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code Spring, TX 77393-2166	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 813/828 Rpt: 817/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77393-2166	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winsberg, Nora <hr/> Contributor address; City; State; Zip Code Asheville, NC 28805-1669	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winsberg, Nora <hr/> Contributor address; City; State; Zip Code Asheville, NC 28805-1669	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Alyson <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28209-1606	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winton, Ann M. <hr/> Contributor address; City; State; Zip Code New York, NY 10023-3931	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 814/828 Rpt: 818/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winton, Ann M.	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code New York, NY 10023-3931	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winton, Ann M.	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code New York, NY 10023-3931	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winton, Ann M.	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code New York, NY 10023-3931	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wittie, Patricia	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Washington, DC 20016-3704	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wofford, Daniel	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bryn Mawr, PA 19010-3202	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 815/828 Rpt: 819/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wofford, Daniel <hr/> 6 Contributor address; City; State; Zip Code Bryn Mawr, PA 19010-3202	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Joel <hr/> Contributor address; City; State; Zip Code Mount Kisco, NY 10549-4528	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Joel <hr/> Contributor address; City; State; Zip Code Mount Kisco, NY 10549-4528	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Joel <hr/> Contributor address; City; State; Zip Code Mount Kisco, NY 10549-4528	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Joel <hr/> Contributor address; City; State; Zip Code Mount Kisco, NY 10549-4528	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 816/828 Rpt: 820/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Joel <hr/> 6 Contributor address; City; State; Zip Code Mount Kisco, NY 10549-4528	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Gary <hr/> Contributor address; City; State; Zip Code Fountain Hills, AZ 85268-8417	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Gary <hr/> Contributor address; City; State; Zip Code Fountain Hills, AZ 85268-8417	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Gary <hr/> Contributor address; City; State; Zip Code Fountain Hills, AZ 85268-8417	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Gary <hr/> Contributor address; City; State; Zip Code Fountain Hills, AZ 85268-8417	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 817/828 Rpt: 821/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Gary <hr/> 6 Contributor address; City; State; Zip Code Fountain Hills, AZ 85268-8417	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolter, Chester <hr/> Contributor address; City; State; Zip Code Hillsboro, OR 97124-8301	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolter, Chester <hr/> Contributor address; City; State; Zip Code Hillsboro, OR 97124-8301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolter, Chester <hr/> Contributor address; City; State; Zip Code Hillsboro, OR 97124-8301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard-Kelley, Rachel <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98029-7326	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 818/828 Rpt: 822/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard-Kelley, Rachel <hr/> 6 Contributor address; City; State; Zip Code Issaquah, WA 98029-7326	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard-Kelley, Rachel <hr/> Contributor address; City; State; Zip Code Issaquah, WA 98029-7326	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Gary <hr/> Contributor address; City; State; Zip Code Lacey, WA 98516-6658	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Gary <hr/> Contributor address; City; State; Zip Code Lacey, WA 98516-6658	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Gary <hr/> Contributor address; City; State; Zip Code Lacey, WA 98516-6658	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 819/828 Rpt: 823/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Gary <hr/> 6 Contributor address; City; State; Zip Code Lacey, WA 98516-6658	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Gary <hr/> Contributor address; City; State; Zip Code Lacey, WA 98516-6658	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodsmall, Lorna <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92010-5672	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodsmall, Lorna <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92010-5672	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodsmall, Lorna <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92010-5672	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 820/828 Rpt: 824/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodsmall, Lorna <hr/> 6 Contributor address; City; State; Zip Code Carlsbad, CA 92010-5672	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodsmall, Lorna <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92010-5672	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodsmall, Lorna <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92010-5672	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthington, Thomas <hr/> Contributor address; City; State; Zip Code Salinas, CA 93908-9426	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthington, Thomas <hr/> Contributor address; City; State; Zip Code Salinas, CA 93908-9426	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 821/828 Rpt: 825/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthington, Thomas <hr/> 6 Contributor address; City; State; Zip Code Salinas, CA 93908-9426	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthington, Thomas <hr/> Contributor address; City; State; Zip Code Salinas, CA 93908-9426	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthington, Thomas <hr/> Contributor address; City; State; Zip Code Salinas, CA 93908-9426	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthington, Thomas <hr/> Contributor address; City; State; Zip Code Salinas, CA 93908-9426	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wray, Doug <hr/> Contributor address; City; State; Zip Code Indianapolis, IN 46256-3454	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 822/828 Rpt: 826/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Judy	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Fountain Hill, PA 18015-1140		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Nicholas B.	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Fairfax, VA 22031-4802		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wulfkuhle, Virginia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lawrence, KS 66049-9195		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wulfkuhle, Virginia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lawrence, KS 66049-9195		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wulfkuhle, Virginia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lawrence, KS 66049-9195		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 823/828 Rpt: 827/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wylie, Christina <hr/> 6 Contributor address; City; State; Zip Code Palos Verdes Estates, CA 90274-4340	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagoda, Nicholas <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2348	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagoda, Nicholas <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2348	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagoda, Nicholas <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2348	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagoda, Nicholas <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2348	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 824/828 Rpt: 828/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yakimiuk, Nina <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20000	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yakimiuk, Nina <hr/> Contributor address; City; State; Zip Code Washington, DC 20000	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarkin, Ray E. <hr/> Contributor address; City; State; Zip Code Surfside, FL 33154-2616	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yorkshire, Wendy <hr/> Contributor address; City; State; Zip Code Logsden, OR 97357-9710	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Marie <hr/> Contributor address; City; State; Zip Code Cherry Hill, NJ 08034-3006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 825/828 Rpt: 829/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Marie <hr/> 6 Contributor address; City; State; Zip Code Cherry Hill, NJ 08034-3006	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Marie <hr/> Contributor address; City; State; Zip Code Cherry Hill, NJ 08034-3006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Marie <hr/> Contributor address; City; State; Zip Code Cherry Hill, NJ 08034-3006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Marie <hr/> Contributor address; City; State; Zip Code Cherry Hill, NJ 08034-3006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Marie <hr/> Contributor address; City; State; Zip Code Cherry Hill, NJ 08034-3006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 826/828 Rpt: 830/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Marie	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Cherry Hill, NJ 08034-3006		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Marie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Cherry Hill, NJ 08034-3006		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahn, Barbara	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Sheboygan, WI 53083-3557		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahn, Barbara	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Sheboygan, WI 53083-3557		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahn, Barbara	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Sheboygan, WI 53083-3557		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 827/828 Rpt: 831/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zellmer, Sandra <hr/> 6 Contributor address; City; State; Zip Code Wauwatosa, WI 53213-1429	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zellmer, Sandra <hr/> Contributor address; City; State; Zip Code Wauwatosa, WI 53213-1429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zellmer, Sandra <hr/> Contributor address; City; State; Zip Code Wauwatosa, WI 53213-1429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zellmer, Sandra <hr/> Contributor address; City; State; Zip Code Wauwatosa, WI 53213-1429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimet, Jonathan <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19119-3223	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 828/828 Rpt: 832/844
2 FILER NAME National Democratic Redistricting Committee		3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimet, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19119-3223	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimet, Jonathan <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19119-3223	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimet, Jonathan <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19119-3223	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Herman <hr/> Contributor address; City; State; Zip Code Portland, OR 97212-3239	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Herman <hr/> Contributor address; City; State; Zip Code Portland, OR 97212-3239	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/01/2024	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$1,512.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/07/2024	Candidate/Officeholder name ActBlue Technical Services	
Amount (\$) \$1,639.14 <input type="checkbox"/> Expenditure from corporate funds	Office sought 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/14/2024	Candidate/Officeholder name ActBlue Technical Services	
Amount (\$) \$1,853.11 <input type="checkbox"/> Expenditure from corporate funds	Office sought 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
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4 Date 07/21/2024	5 Payee name ActBlue Technical Services
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6 Amount (\$) \$1,046.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/28/2024	Payee name ActBlue Technical Services
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Amount (\$) \$1,077.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/04/2024	Payee name ActBlue Technical Services
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Amount (\$) \$4,207.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
4 Date 08/11/2024	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$1,022.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2024	Payee name ActBlue Technical Services	
Amount (\$) \$1,131.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/25/2024	Payee name ActBlue Technical Services	
Amount (\$) \$2,574.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
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4 Date 09/01/2024	5 Payee name ActBlue Technical Services
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6 Amount (\$) \$1,633.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/08/2024	Payee name ActBlue Technical Services
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Amount (\$) \$1,230.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/15/2024	Payee name ActBlue Technical Services
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Amount (\$) \$1,579.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
4 Date 09/22/2024	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$3,080.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/29/2024	Candidate/Officeholder name ActBlue Technical Services	
Amount (\$) \$3,048.78 <input type="checkbox"/> Expenditure from corporate funds	Office sought 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/01/2024	Candidate/Officeholder name ActBlue Technical Services	
Amount (\$) \$742.43 <input type="checkbox"/> Expenditure from corporate funds	Office sought 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/06/2024	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$1,487.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2024	Payee name ActBlue Technical Services	
Amount (\$) \$2,717.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2024	Payee name ActBlue Technical Services	
Amount (\$) \$2,473.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
4 Date 07/19/2024	5 Payee name Blue State Digital	
6 Amount (\$) \$17,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 62187 Collection Center Dr Chicago, IL 60693-0621	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2024	Payee name Blue State Digital	
Amount (\$) \$77,029.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 62187 Collection Center Dr Chicago, IL 60693-0621	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Blue State Digital	
Amount (\$) \$22,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 62187 Collection Center Dr Chicago, IL 60693-0621	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
4 Date 10/22/2024	5 Payee name Bonnie Lee Goldstein Campaign	
6 Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 140940 Dallas, TX 75214-0940	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2024	Payee name DaSean for Texas	
Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2450 Louisiana St Ste 400 Houston, TX 77006-2318	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/19/2024	Payee name Elias Law Group	
Amount (\$) \$12,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 250 Massachusetts Ave NW Ste 400 Washington, DC 20001-5825	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
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4 Date 09/30/2024	5 Payee name Elias Law Group
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6 Amount (\$) \$12,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 250 Massachusetts Ave NW Ste 400 Washington, DC 20001-5825
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/29/2024	Payee name Fulco, Adrienne
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9 Cobblestone Rd Glastonbury, CT 06033-2505
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Refund	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/13/2024	Payee name George, Barbara
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Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2109 NW 81st St Kansas City, MO 64151-3745
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Refund	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
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4 Date 09/18/2024	5 Payee name Justice for All - Michigan
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6 Amount (\$) \$250,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 325 S Walnut St Lansing, MI 48933-2013
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/28/2024	Payee name Kahrmanis, Tamara
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Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1345 W Camino Urbano Green Valley, AZ 85622-4647
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Refund	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2024	Payee name Maurer, Marilyn
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 538 Ballytore Rd Wynnewood, PA 19096-2208
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Refund	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
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4 Date 10/16/2024	5 Payee name National Redistricting Action Fund
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6 Amount (\$) \$193,209.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 712 H St NE #25 Washington, DC 20002-3627
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Time and Overhead
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/16/2024	Payee name National Redistricting Action Fund
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Amount (\$) \$128,704.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 712 H St NE #25 Washington, DC 20002-3627
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Time and Overhead
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/22/2024	Payee name Ohioans for Judicial Integrity (OFJI)
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Amount (\$) \$300,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 35 E Gay St Ste 502 Columbus, OH 43215-3138
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/12 Rpt:	2 FILER NAME National Democratic Redistricting Committee	3 Filer ID (Ethics Commission Filers) 00084832
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4 Date 07/19/2024	5 Payee name Salesberry Group LLC
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6 Amount (\$) \$238.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2045 W Grand Ave Ste B31638 Chicago, IL 60612-1576
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscriptions
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/11/2024	Payee name Stirling, Deborah
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 295 Windermere Dr Chesterton, IN 46304-9337
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Refund	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/15/2024	Payee name The PAC for America's Future
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Amount (\$) \$200,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 611 Pennsylvania Ave SE Num 143 Washington, DC 20003-4303
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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