

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61687 OF 3129315
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**ActBlue**

Full Name (Last, First, Middle Initial) <b>A. ROBERT TYLER</b>		Date of Receipt MM / DD / YYYY 07 / 06 / 2015 <b>Transaction ID : SA11AI_28504097</b>
Mailing Address 3033 THREE SPRINGS ROAD		Amount of Each Receipt this Period 250.00
City SAN JOSE	State CA	Zip Code 95140
FEC ID number of contributing federal political committee. C	Earmark Earmarked for CATHERINE CORTEZ MASTO FOR SENATE (C00575548)	
Name of Employer TYLER & COMPANY	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. ROBERT TYLER</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2015 <b>Transaction ID : SA11AI_30459603</b>
Mailing Address 1220 SHELTON AVE		Amount of Each Receipt this Period 10.00
City NASHVILLE	State TN	Zip Code 37216
FEC ID number of contributing federal political committee. C	Earmark Earmarked for BERNIE 2016 (C00577130)	
Name of Employer SELF	Occupation MUSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10.00	

Full Name (Last, First, Middle Initial) <b>C. ROBERT TYLER</b>		Date of Receipt MM / DD / YYYY 10 / 01 / 2015 <b>Transaction ID : SA11AI_31408690</b>
Mailing Address 15775 PINE STREET		Amount of Each Receipt this Period 5.00
City SPRING LAKE	State MI	Zip Code 49456
FEC ID number of contributing federal political committee. C	Earmark Earmarked for BERNIE 2016 (C00577130)	
Name of Employer DON BASIL, INC.	Occupation MACHINE OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	265.00
<b>TOTAL</b> This Period (last page this line number only).....	