

**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 1079 OF 3129315
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ActBlue

A. BARBARA KAUFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1295 32ND ST. SW
 City PINE RIVER State MN Zip Code 56474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **25.00**

Date of Receipt **12 / 18 / 2015**
Transaction ID : SA11AI 34561041
 Amount of Each Receipt this Period **25.00**
 Earmark
 Earmarked for CHC BOLD PAC/COMMITTEE FOR HISPANIC CAUSES BUILDING OUR LEADERSHIP DIVERSITY (C0036553)

B. BARBARA KAUFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1228 MONTGOMERY #5
 City SAN FRANCISCO State CA Zip Code 94133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation NONE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **12 / 30 / 2015**
Transaction ID : SA11AI 35263457
 Amount of Each Receipt this Period **500.00**
 Earmark
 Earmarked for KYRSTEN SINEMA FOR CONGRESS (C00508804)

C. BARRY KAUFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2258 W HURON
 City CHICAGO State IL Zip Code 60612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KAREN S BRIGGS Occupation PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1235.00**

Date of Receipt **07 / 04 / 2015**
Transaction ID : SA11AI 28478092
 Amount of Each Receipt this Period **35.00**
 Earmark
 Earmarked for BERNIE 2016 (C00577130)

SUBTOTAL of Receipts This Page (optional)..... **560.00**
TOTAL This Period (last page this line number only).....