

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

| | | |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 67 OF 229 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Barbara Lee for Congress

A. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 382110
 City Cambridge State MA Zip Code 02238-2110
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 86961.89

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : VN8DMDXV0D4E
 Amount of Each Receipt this Period
 20.00
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. John P Gooding
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 8400
 City Emeryville State CA Zip Code 94662-0400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Consultant
 MILO Group
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015
Transaction ID : VN8DMDXNV42
 Amount of Each Receipt this Period
 2700.00

C. Robert Gould
 Full Name (Last, First, Middle Initial)
 Mailing Address 311 Douglass St
 City San Francisco State CA Zip Code 94114-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Physician
 UCSFS
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2015
Transaction ID : VN8DMDXH2R6
 Amount of Each Receipt this Period
 250.00
 * Earmarked Contribution: See Below

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

2950.00