

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 604 OF 2868

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Ilhan for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
375042.60

Date of Receipt

M M	D D	Y Y Y Y
02	10	2020

Transaction ID : VVBVHQEJ1S1E

Amount of Each Receipt this Period

35.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
De Bont, Jan, , ,

Mailing Address 501 S Beverly Dr
FI 3

City Beverly Hills State CA Zip Code 90212-4520

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

Name of Employer Occupation
Self-Employed Director

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
808.29

Date of Receipt

M M	D D	Y Y Y Y
01	08	2020

Transaction ID : VVBVHQEQ7C1

Amount of Each Receipt this Period

35.00

☐ Memo Item

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
375042.60

Date of Receipt

M M	D D	Y Y Y Y
01	09	2020

Transaction ID : VVBVHQEQ7C1E

Amount of Each Receipt this Period

35.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

35.00
