

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 796 OF 949

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ellison for Congress

Full Name (Last, First, Middle Initial)

ActBlue**A.**

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

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

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80051.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	7

Transaction ID : VN8A3EF3A18E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this
organization.

Full Name (Last, First, Middle Initial)

Watlov Phillips, Sue, , ,**B.**

Mailing Address 1355 Hillcrest Dr NE

City

Fridley

State

MN

Zip Code

55432-5827

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

Name of Employer

Occupation

Integrated Community Solutions, Inc

President 7CEO

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	7

Transaction ID : VN8A3EF6E03

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ActBlue**C.**

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

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

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80051.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	2		2	0	1	7

Transaction ID : VN8A3EF6E03E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this
organization.

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

100.00