

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

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

FOR LINE NUMBER: PAGE 50 OF 60  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GREEN PARTY OF THE UNITED STATES**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Yager, Tamar, , ,**

Mailing Address 818 E Stonewall Dr

City

Front Royal

State

VA

Zip Code

22630

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

none

Occupation (for Individual)

Community Volunteer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3431.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2019

Transaction ID : SA11AI.48854

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Donation

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Yager, Tamar, , ,**

Mailing Address 818 E Stonewall Dr

City

Front Royal

State

VA

Zip Code

22630

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

none

Occupation (for Individual)

Community Volunteer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2019

Transaction ID : SA11AI.48985

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Donation

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Zeps, Dace, , ,**

Mailing Address 3013 Worthington Ave

City

Madison

State

WI

Zip Code

53714

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Wisconsin Network for Peace and Justic

Occupation (for Individual)

administrator

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

722.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2019

Transaction ID : SA11AI.48679

Amount of Each Receipt this Period

5.00

☐ Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

130.00

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