

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

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

FOR LINE NUMBER: PAGE 2818 OF 12447

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

House Majority PAC

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

A. Kohn, Linda, , ,

Mailing Address PO Box 655

City  
DevaultState  
PAZip Code  
19432-0655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Whitford Family MedicineOccupation (for Individual)  
Nurse Practitioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 18 / 2019

Transaction ID : VN8FNM4RCZ3

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

B. ACTBLUE

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1732278.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 19 / 2019

Transaction ID : VN8FNM4RCZ3E

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Post, Boyd, , ,

Mailing Address 12158 Cathedral Dr

City  
WoodbridgeState  
VAZip Code  
22192-2228FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

482.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 17 / 2019

Transaction ID : VN8FNM4RDZ3

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

10.00