

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

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

FOR LINE NUMBER: PAGE 326 OF 4438

(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)

EMILY's List

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

A. Kellogg, Pamela, , ,

Mailing Address 241 Perkins St. Unit C505

City

Jamaica Plain

State

MA

Zip Code

2130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pamela P. Kellogg

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 27 / 2020

Transaction ID : 6304417

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

B. Royden, Constance, , Dr.,

Mailing Address 56 Lindbergh Ave

City

Needham

State

MA

Zip Code

2494

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

College Of The Holy Cross

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 25 / 2020

Transaction ID : 6298801

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Royden, Constance, , Dr.,

Mailing Address 56 Lindbergh Ave

City

Needham

State

MA

Zip Code

2494

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

College Of The Holy Cross

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 06 / 2020

Transaction ID : 6277915

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

900.00

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