

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CHC BOLD PAC

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

A. Rinaldi, Tom, , ,

Mailing Address 619 Pratt Ave

City
Saint Helena

State
CA

Zip Code
94574-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : VTEJXYAKRV6

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Rinaldi, Tom, , ,

Mailing Address 619 Pratt Ave

City
Saint Helena

State
CA

Zip Code
94574-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : VTEJXYAKRW4

Amount of Each Receipt this Period

164.00

☐ Memo Item

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

C. Rinaldi, Tom, , ,

Mailing Address 619 Pratt Ave

City
Saint Helena

State
CA

Zip Code
94574-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : VTEJXYB0E56

Amount of Each Receipt this Period

274.00

☐ Memo Item

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

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

938.00