

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

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

FOR LINE NUMBER: PAGE 19663 OF 43520

(check only one)

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

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NAME OF COMMITTEE (In Full)

Stop Republicans

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

A. Hofschulte, Lloyd, , ,

Mailing Address 180 Patterson Rd

City
Santa Maria

State
CA

Zip Code
93455-4812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 23 / 2020

Transaction ID : VTR0FMD6MG4

Amount of Each Receipt this Period

3.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. ActBlue

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7986668.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 23 / 2020

Transaction ID : VTR0FMD6MG4E

Amount of Each Receipt this Period

3.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. La Farge, Grant, , ,

Mailing Address PO Box 4760

City
Santa Fe

State
NM

Zip Code
87502-4760

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nm Medicalboard

Occupation (for Individual)
Physician Ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

388.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 23 / 2020

Transaction ID : VTR0FMD72G4

Amount of Each Receipt this Period

10.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

13.00