

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 129 OF 405

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Adair for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City: West Somerville State: MA Zip Code: 02144-0031

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
149517.51

Date of Receipt

M M	D D	Y Y Y Y
12	29	2019

Transaction ID : VVC5RQGV4D3E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Gross, Katherine, , ,

Mailing Address 19 Arlington St

City: Cambridge State: MA Zip Code: 02140-2701

FEC ID number of contributing federal political committee: **C**

Name of Employer: Occupation: Director

The Charlotte Foundation

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M	D D	Y Y Y Y
11	26	2019

Transaction ID : VVC5RQATBE3

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City: West Somerville State: MA Zip Code: 02144-0031

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
149517.51

Date of Receipt

M M	D D	Y Y Y Y
12	01	2019

Transaction ID : VVC5RQATBE3E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

250.00
