

# **SCHEDULE A (FEC Form 3)** **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 ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
Alyse for Alaska

<b>A.</b> Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2019		
Mailing Address 366 Summer St			<b>Transaction ID : 4136263E</b>		
City Somerville	State MA	Zip Code 02144-3132	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C C00401224		Name of Employer Occupation Conduit total listed in Agg. field			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 207385.00			
<b>B.</b> Full Name (Last, First, Middle Initial) Orlansky, Susan, C, ,			Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2019		
Mailing Address 2141 Esquire Dr			<b>Transaction ID : 4083140</b>		
City Anchorage	State AK	Zip Code 99517-1346	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Reeves Amodio LLC Attorney			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00			
<b>C.</b> Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2019		
Mailing Address 366 Summer St			<b>Transaction ID : 4083140E</b>		
City Somerville	State MA	Zip Code 02144-3132	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C C00401224		Name of Employer Occupation Conduit total listed in Agg. field			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 207385.00			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			_____ 250.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			_____		