

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5857 OF 11148

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Equality PAC

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

A. Leifer, Lauren, , ,

Mailing Address 2593 W Ellery Ave

City
FresnoState
CAZip Code
93711-1726FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Childrens Hospital Central CaloifOccupation (for Individual)
Rn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2019

Transaction ID : VSH0PJY1AX8

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 SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

812383.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2019

Transaction ID : VSH0PJY1AX8E

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. Leifer, Lauren, , ,

Mailing Address 2593 W Ellery Ave

City
FresnoState
CAZip Code
93711-1726FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Childrens Hospital Central CaloifOccupation (for Individual)
Rn

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2019

Transaction ID : VSH0PJY55G4

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

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

28.00

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