

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

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

FOR LINE NUMBER: PAGE 345 OF 1104

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Congressional Black Caucus PAC**

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

**A. Gallagher, Elizabeth, E., ,**

Mailing Address 8 Strong Pl

City  
Brooklyn

State  
NY

Zip Code  
11231-3752

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2019

Transaction ID : VNW66H4MVN0

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Garcia, Lourdes, , ,**

Mailing Address 5933 W Century Blvd  
# 322

City  
Los Angeles

State  
CA

Zip Code  
90045-5471

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Colonial South Bay Insurance Brokers

Occupation (for Individual)  
Insurance Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 07 / 2019

Transaction ID : VNW66H4FE64

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

**C. Garcia, Lourdes, , ,**

Mailing Address 5933 W Century Blvd  
# 322

City  
Los Angeles

State  
CA

Zip Code  
90045-5471

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Colonial South Bay Insurance Brokers

Occupation (for Individual)  
Insurance Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2019

Transaction ID : VNW66H4P731

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

72.00