

**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)	PAGE 343 OF 976
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pete Aguilar for Congress

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

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

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **138953.77**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 27 / 2015

Transaction ID : VN8JBDM5Y69E

Amount of Each Receipt this Period
 _____ **35.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Shay Hancock

Mailing Address **2400 Tunlaw Rd NW**

City **Washington** State **DC** Zip Code **20007-1818**

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

Name of Employer **Capitol Strategies** Occupation **Consultant**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : VN8JBDM7DX1

Amount of Each Receipt this Period
 _____ **500.00**

* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

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

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **138953.77**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VN8JBDM7DX1E

Amount of Each Receipt this Period
 _____ **500.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

_____ **500.00**
