

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 16 OF 62

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Adam Smith for Congress Committee

Full Name (Last, First, Middle Initial)

Irvin-Klein, Albany, , ,

A.

Mailing Address 2800 Post River Rd

City

Cedar Park

State

TX

Zip Code

78613-2533

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Strategic Sales Branding Director

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 29 2019

Transaction ID : VSHD3HQYFM8

Amount of Each Receipt this Period

1850.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kil, Jonathan, , ,

B.

Mailing Address 3404 E Yesler Way

City

Seattle

State

WA

Zip Code

98122-6568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sound Pharmaceuticals

Occupation

Physician

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 19 2019

Transaction ID : VSHD3HP7X49

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kongsgaard, Martha, Jane, ,

C.

Mailing Address 4408 Beach Dr SW

City

Seattle

State

WA

Zip Code

98116-3937

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 20 2019

Transaction ID : VSHD3HQ14S5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

3200.00