

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 OF 7007

(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)

End Citizens United

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

A. Andersen, Marsha, , ,

Mailing Address 8302 Kingsdale Dr

City  
Huntington BeachState  
CAZip Code  
92646-3829FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VECTOR Inc.Occupation (for Individual)  
Vocational Evaluator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2020

Transaction ID : 9836291

Amount of Each Receipt this Period

15.00

☐ 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 ▼

1489003.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2020

Transaction ID : 9836291E

Amount of Each Receipt this Period

15.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Andersen, Marsha, , ,

Mailing Address 8302 Kingsdale Dr

City  
Huntington BeachState  
CAZip Code  
92646-3829FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VECTOR Inc.Occupation (for Individual)  
Vocational Evaluator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2020

Transaction ID : 9823524

Amount of Each Receipt this Period

8.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

23.00

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