

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**ActBlue**

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

**A. CRONIN, MARTHA, , ,**

Mailing Address 41 BAY VIEW ROAD

City  
WELLESLEY

State  
MA

Zip Code  
02482

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRANDEIS UNIVERSITY

Occupation (for Individual)  
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

02 / 19 / 2018

Transaction ID : SA11AI\_103715966

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Earmark

Earmarked for GIFFORDS PAC (C00540443)

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

**B. CRONIN, MARY, , ,**

Mailing Address 201 CLEVELAND DRIVE

City

CROTON ON HUDSON

State

NY

Zip Code

10520

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

02 / 16 / 2018

Transaction ID : SA11AI\_103400621

Amount of Each Receipt this Period

10.00

☐ Memo Item  
Earmark

Earmarked for GIFFORDS PAC - IE (C00540443)

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

**C. CRONIN, MICHAEL, , ,**

Mailing Address 41325 N CANYON RIDGE TR

City

CAVE CREEK

State

AZ

Zip Code

85331

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NATUROPATHIC PHYSICIANS GROUP

Occupation (for Individual)  
NATUROPATHIC PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

02 / 06 / 2018

Transaction ID : SA11AI\_102600564

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Earmark

Earmarked for SINEMA FOR ARIZONA ()

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

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

135.00