

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Sri for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Allen, Virginia, , ,**

Mailing Address 701 E 19Th St

City Houston	State TX	Zip Code 77008-4424
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FEC ID number of contributing federal political committee. **C**

Name of Employer Legacy Community Healthcare	Occupation Psychiatrist
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Receipt For: 2020  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
222.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : VVBQ1QFV6R2

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ActBlue**

Mailing Address PO Box 441153

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
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Receipt For: 2020  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
128296.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2020

Transaction ID : VVBQ1QFV6R2E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Brown, Christine, , ,**

Mailing Address 57 Grist Mill Rd

City Littleton	State MA	Zip Code 01460-2250
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FEC ID number of contributing federal political committee. **C**

Name of Employer Not Employed	Occupation Not Employed
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Receipt For: 2020  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : VVBQ1QFV6H6

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

275.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶