

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

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

FOR LINE NUMBER: PAGE 127 OF 1539

(check only one)

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

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)

Congressional Black Caucus PAC

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

A. Barry, Robert, , ,

Mailing Address 17 Pulsifer St

City
NewtonState
MAZip Code
02460-2220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2020

Transaction ID : VNW66HG3778

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Barry, Robert, , ,

Mailing Address 17 Pulsifer St

City
NewtonState
MAZip Code
02460-2220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2020

Transaction ID : VNW66HG3786

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Barry, Robert, , ,

Mailing Address 17 Pulsifer St

City
NewtonState
MAZip Code
02460-2220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

765.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2020

Transaction ID : VNW66HG37A1

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

33.00

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