

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 455 OF 1297

☒ 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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Green, Sylvia, , ,

Mailing Address 16 Harcourt St

City Boston	State MA	Zip Code 02116-5739
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 582.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 25 2019

Transaction ID : VPF8MPB03Y3

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 467464.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 28 2019

Transaction ID : VPF8MPB03Y3E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Stevens, Nancy, , ,

Mailing Address 174 Cottage St
 Apt 2F

City East Boston	State MA	Zip Code 02128-3165
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Beth Israel Deaconess Medical Center	Occupation Patient Access
--	------------------------------

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 363.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 24 2019

Transaction ID : VPF8MPB07Y3

Amount of Each Receipt this Period

10.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

60.00