

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Cheri Bustos

A. Full Name (Last, First, Middle Initial) ActBlue			Date of Receipt M M / D D / Y Y Y Y Y 11 / 25 / 2019		
Mailing Address PO Box 382110			Transaction ID : 4566189E		
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C C00401224		Name of Employer Occupation Conduit total listed in Agg. field			
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 108007.00			
B. Full Name (Last, First, Middle Initial) Wallace, Mary, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 02 / 2019		
Mailing Address 804 Main St			Transaction ID : 4323662		
City Henry	State IL	Zip Code 61537-1131	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Not Employed			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 650.00			
C. Full Name (Last, First, Middle Initial) ActBlue			Date of Receipt M M / D D / Y Y Y Y Y 10 / 07 / 2019		
Mailing Address PO Box 382110			Transaction ID : 4323662E		
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C C00401224		Name of Employer Occupation Conduit total listed in Agg. field			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 108007.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			15.00		
TOTAL This Period (last page this line number only)..... ▶					