

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 877 OF 3539
(check only one)

| | | | | | | | | |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

Fair Fight

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

A. Gumpert, Richard, , ,

Mailing Address 77 Brook St

City
BrooklineState
MAZip Code
02445-6915FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cambridge Health AllianceOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

| | | |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 09 | 27 | 2019 |

Transaction ID : VR060TWN0K3

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

B. Gumpert, Richard, , ,

Mailing Address 77 Brook St

City
BrooklineState
MAZip Code
02445-6915FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cambridge Health AllianceOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

| | | |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 12 | 19 | 2019 |

Transaction ID : VR060TXR959

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Gunby, Carol, , ,

Mailing Address 972 Katherine Ct

City
San JoseState
CAZip Code
95126-1623FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GoogleOccupation (for Individual)
Technical Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 09 | 18 | 2019 |

Transaction ID : VR060TVJB68

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

700.00

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