

# **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)  
**Xochitl for New Mexico**

**A.** Full Name (Last, First, Middle Initial)  
**Carlisle, Linda, , ,**

Mailing Address 233 Fisher Ave

City Brookline	State MA	Zip Code 02445-4231
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Consultant
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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 02 2020

Transaction ID : VVBGKQG22F5

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

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 ▼  
392163.96

Date of Receipt

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

Transaction ID : VVBGKQG22F5E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Caroe, Alan, , ,**

Mailing Address 510 N Park Dr

City Las Cruces	State NM	Zip Code 88005-3864
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Physician
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Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 20 2020

Transaction ID : VVBGKQGH807

Amount of Each Receipt this Period

500.00

☐ Memo Item

750.00

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

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