

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

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

FOR LINE NUMBER: PAGE 70 OF 297

(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Giffords PAC

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

A. Epstein, Jane, , ,

Mailing Address 30 E 71St St

8A

City

New York

State

NY

Zip Code

10021-4956

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2020

Transaction ID : 1555213

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Non-Contribution Account; Earmarked Contribution:
See Below

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

B. ACT BLUE

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 (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

139114.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2020

Transaction ID : 1555213E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this
organization.

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

C. Erbaugh, Nan, , ,

Mailing Address 712 Mill Ridge Cir

City

Englewood

State

OH

Zip Code

45322-8784

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lower Miami Church Of The Brethren

Occupation (for Individual)

Pastor

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2020

Transaction ID : 1536957

Amount of Each Receipt this Period

300.00

☐ Memo Item

| Non-Contribution Account

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

400.00

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