

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

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

FOR LINE NUMBER: PAGE 83 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medicare for All

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

A. Hofschulte, Lloyd, , ,

Mailing Address 180 Patterson Rd

City  
Santa Maria

State  
CA

Zip Code  
93455-4812

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2019

Transaction ID : VNVV5H4BYZ4

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

B. ActBlue

Mailing Address PO Box 441146

City  
West Somerville

State  
MA

Zip Code  
02144-0031

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 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16681.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2019

Transaction ID : VNVV5H4BYZ4E

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Hofschulte, Lloyd, , ,

Mailing Address 180 Patterson Rd

City  
Santa Maria

State  
CA

Zip Code  
93455-4812

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2019

Transaction ID : VNVV5H5CRT9

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

10.00

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