

# **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)

PAGE 206 OF 1604

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Kennedy for Massachusetts**

Full Name (Last, First, Middle Initial)

**Cooney, Joan, , ,**

Mailing Address 399 Park Ave

FI 14

City

New York

State

NY

Zip Code

10022-4614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2020

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020

09

2020

Transaction ID : VNHWQFBWCW8

Amount of Each Receipt this Period

2800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Cooney, Joan, , ,**

Mailing Address 399 Park Ave

FI 14

City

New York

State

NY

Zip Code

10022-4614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020

09

2020

Transaction ID : VNHWQFBWCX6

Amount of Each Receipt this Period

2800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Cooper, Robert, W, ,**

Mailing Address 45 High St

City

South Dartmouth

State

MA

Zip Code

02748-3833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Klear Vu

Occupation

Engineer

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2020

03

2020

Transaction ID : VNHWQFA6859

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

6600.00

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