

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kennedy for Massachusetts

Full Name (Last, First, Middle Initial)

Vowels, G, , ,

A.

Mailing Address 6825 Natural Bridge Rd

City

Saint Louis

State

MO

Zip Code

63121-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Self employed

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	2	0

Transaction ID : VNHWQFBFVY2

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ActBlue Technical Services

B.

Mailing Address 14 Arrow St

City

Cambridge

State

MA

Zip Code

02138-5106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1450571.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	2	0

Transaction ID : VNHWQFBFVY2E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Vowels, G, , ,

C.

Mailing Address 6825 Natural Bridge Rd

City

Saint Louis

State

MO

Zip Code

63121-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Self employed

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	0

Transaction ID : VNHWQFCHAG3

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

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

50.00

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