

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

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

FOR LINE NUMBER: PAGE 92 OF 279  
(check only one)

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

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)

**Indivisible Action**

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

**A. Goodman, David, , ,**

Mailing Address 10 MountainView Road

City  
Upper Saddle River

State  
NJ

Zip Code  
07458

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2020

**Transaction ID : SA17.213215**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Non-Contribution Account

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

**B. Goodman, Ellen, , ,**

Mailing Address 210 S 25th St

City  
Philadelphia

State  
PA

Zip Code  
19103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Rutgers

Occupation (for Individual)  
Law prof

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2020

**Transaction ID : SA17.226873**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Non-Contribution Account

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

**C. Gottstein, Sandy, , ,**

Mailing Address PO Box 111818

City  
Anchorage

State  
AK

Zip Code  
99511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

**Transaction ID : SA17.173932**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Non-Contribution Account

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

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

1500.00