

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 877 OF 5070

(check only one)

<input checked="" 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 type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**EMILY's List**

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

**A. Terry, Susan, , Ms.,**

Mailing Address 2867 64th Terrace South

City

St. Petersburg

State

FL

Zip Code

33712

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Broadwater Hearing Care

Occupation (for Individual)

Audiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2019

**Transaction ID : 6187645**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Cosby, Catherine, , ,**

Mailing Address 93 Big Horn Trail

City

Ponte Vedra

State

FL

Zip Code

32081

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Capt. Bob's Fishing Charters, Inc.

Occupation (for Individual)

Vp

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
10		11		2019

**Transaction ID : 6194446**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. Sands, Ida, , ,**

Mailing Address 270 Jaro Street NE

City

Palm Bay

State

FL

Zip Code

32907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Comerica Bank

Occupation (for Individual)

Software Developer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2019

**Transaction ID : 6210460**

Amount of Each Receipt this Period

35.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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