

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 224  
(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)

**Human Rights Campaign PAC**

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

**A. Bobeck, John, , ,**

Mailing Address 699 St Marks Ln

City  
NiskayunaState  
NYZip Code  
12309-4924FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Center for Internet SecurityOccupation (for Individual)  
Technical Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
06	20	2019

**Transaction ID : VVBMQNAKES0**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Bolling, Christopher, , ,**

Mailing Address 3901 Ledgewood Dr

City  
CincinnatiState  
OHZip Code  
45229-1703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Pediatric AssociatesOccupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
06	20	2019

**Transaction ID : VVBMQNAKFJ8**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Bonsaint, Thomas, , ,**Mailing Address 1020 N Stafford St  
Apt 400City  
ArlingtonState  
VAZip Code  
22201-4635FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RaytheonOccupation (for Individual)  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
06	20	2019

**Transaction ID : VVBMQNAKNS6**

Amount of Each Receipt this Period

100.00

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

250.00

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