

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 OF 129

(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Party Majority PAC

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

A. Huffman, Richard, , ,

Mailing Address 5601 Bristol Ct

City
AlexandriaState
VAZip Code
22312-6317FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
National Geographic SocietyOccupation (for Individual)
Web Systems Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2020

Transaction ID : 4057169

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below Contribution; IE-Only Account

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

B. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

103072.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2020

Transaction ID : 4057169E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. James, Arleta, , ,

Mailing Address 1201 Canyon View Rd

City
Sagamore HillsState
OHZip Code
44067-2249FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FirstOccupation (for Individual)
Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2020

Transaction ID : 4054456

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below Contribution; IE-Only Account

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

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

300.00