

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use 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)

Joe Neguse for Congress

Full Name (Last, First, Middle Initial)

Casper, Mary, , ,

Mailing Address 1879 S Xenia Ct

City

Denver

State

CO

Zip Code

80231-3331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Colorado Nurses Association

Occupation

Nursing Executive

Receipt For: 2018

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	8

Transaction ID : VN8Q9ERNBM6

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2018

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

118146.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	8

Transaction ID : VN8Q9ERNBM6E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Goldstein, Lynda, , ,

Mailing Address 2400 E Cherry Creek South Dr  
Unit 208

City

Denver

State

CO

Zip Code

80209-3254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For: 2018

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

3200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	8

Transaction ID : VN8Q9ERP9Z6

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

750.00

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