

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

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

FOR LINE NUMBER: PAGE 70 OF 83

(check only one)

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

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NAME OF COMMITTEE (In Full)

**CREATIVE MAJORITY POLITICAL ACTION COMMITTEE**

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

A. Rivers, Jessuca, , ,

Mailing Address 1178 S Lefever Dr.

City

Lititz

State

PA

Zip Code

17543

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Autism research

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 11 / 11 / 2019

Transaction ID : SA11AI.20571

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Rivers, Jessuca, , ,

Mailing Address 1178 S Lefever Dr.

City

Lititz

State

PA

Zip Code

17543

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Autism research

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 / 11 / 2019

Transaction ID : SA11AI.20572

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Rosenfield, Laura, , ,

Mailing Address 14909 Bellbrook Dr.

City

Dallas

State

TX

Zip Code

75254

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Physician

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2019

Transaction ID : SA11AI.20575

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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