

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

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

FOR LINE NUMBER: PAGE 512 OF 2917

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. Nichols, Katie, C., Ms.,

Mailing Address 5860 Snowy Egret Drive

City

Sarasota

State

FL

Zip Code

34238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

REQUESTED

Occupation (for Individual)

REQUESTED

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2030.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2020

Transaction ID : 6386604

Amount of Each Receipt this Period

100.00

☐

Memo Item

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

B. Peters, Marian, , Ms.,

Mailing Address PO Box 957

City

Bradenton

State

FL

Zip Code

34206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Grimmy, Inc

Occupation (for Individual)

President

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  
03 / 22 / 2020

Transaction ID : 6381211

Amount of Each Receipt this Period

100.00

☐

Memo Item

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

C. Schultz, Ronald, , ,

Mailing Address 4650 Links Village Dr. Unit D204

City

Port Orange

State

FL

Zip Code

32127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Professor

Receipt For:

☐  
☐

Primary

☐

General

Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 16 / 2020

Transaction ID : 6377690

Amount of Each Receipt this Period

90.00

☐

Memo Item

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

290.00

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