

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Carolyn for Congress

A. Full Name (Last, First, Middle Initial) Creedy, Irene, Mopps, ,			Date of Receipt M M / D D / Y Y Y Y Y 11 25 2019		
Mailing Address 4914 Kettle River Pt			Transaction ID : VTR0JK2G7H4		
City Suwanee	State GA	Zip Code 30024-8803	Amount of Each Receipt this Period 2800.00		
FEC ID number of contributing federal political committee. C		Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Run-off Primary		Election Cycle-to-Date ▼ 8400.00			
B. Full Name (Last, First, Middle Initial) Orrock, Nan, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 17 2019		
Mailing Address 1070 Delaware Ave SE			Transaction ID : VTR0JJTT6J4		
City Atlanta	State GA	Zip Code 30316-2470	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Memo Item			
Name of Employer State of GA		Occupation Senator			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			
C. Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y Y 10 20 2019		
Mailing Address PO Box 441146			Transaction ID : VTR0JJTT6J4E		
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C C00401224		<input checked="" type="checkbox"/> Memo Item			
Name of Employer Occupation Conduit total listed in Agg. field		Election Cycle-to-Date ▼ 215882.39			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Note: Above Contribution earmarked through this organization.			
SUBTOTAL of Receipts This Page (optional)..... ▶			3050.00		
TOTAL This Period (last page this line number only)..... ▶					