

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

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

FOR LINE NUMBER: PAGE 80 OF 152

(check only one)

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

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NAME OF COMMITTEE (In Full)

Medicare for All

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

A. Kelly, Lawrence, , ,

Mailing Address 2419 Bay Ave

City
Ocean City

State
NJ

Zip Code
08226-2468

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 12 / 2019

Transaction ID : VNVV5H0D4J5

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. 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 (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20092.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2019

Transaction ID : VNVV5H0D4J5E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Kiceniuk, Lily, , ,

Mailing Address 976 La Vuelta PI

City

Santa Paula

State

CA

Zip Code

93060-1328

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

195.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 09 / 2019

Transaction ID : VNVV5H26GF6

Amount of Each Receipt this Period

35.00

☐ Memo Item

* Earmarked Contribution: See Below

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

60.00

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