

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)
Stabenow for US Senate

A. Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2017		
Mailing Address PO Box 382110			Transaction ID : VPFM4NPNH47E		
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period _____ 15.00		
FEC ID number of contributing federal political committee. C C00401224		Name of Employer Occupation Conduit total listed in Agg. field			
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 559953.84			
B. Full Name (Last, First, Middle Initial) English, Elizabeth, S, ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 31 / 2017		
Mailing Address 1 Island Dr Unit 20			Transaction ID : VPFM4NNM247		
City Norwalk	State CT	Zip Code 06855-2719	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Retired			
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 750.00			
C. Full Name (Last, First, Middle Initial) Holman, Louise, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 13 / 2017		
Mailing Address 226 E Oak St			Transaction ID : VPFM4NP4K47		
City Mason	State MI	Zip Code 48854-1730	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Retired			
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1050.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 525.00		
TOTAL This Period (last page this line number only)..... ▶			_____		