

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)

PAGE 27 OF 384

☒ 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) Boozer, Sidney, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2019	
Mailing Address 21 W Wesley Rdg NW			Transaction ID : VTR0JHZXMJ0	
City Atlanta	State GA	Zip Code 30327-2042	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer N/A		Occupation Retired		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		
B. Full Name (Last, First, Middle Initial) Tipton, Ann, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 18 / 2019	
Mailing Address 27 Acacia Dr			Transaction ID : VTR0JJ7PRJ0	
City Orinda	State CA	Zip Code 94563-1703	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer retired		Occupation retired		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		
C. Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2019	
Mailing Address PO Box 441146			Transaction ID : VTR0JJ7PRJ0E	
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		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 169728.29		
SUBTOTAL of Receipts This Page (optional)..... ▶			500.00	
TOTAL This Period (last page this line number only)..... ▶				