

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Jaime Harrison for US Senate

Full Name (Last, First, Middle Initial)

ActBlue

A.

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

3042652.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2019			

Transaction ID : VVC3HPXQA84E

Amount of Each Receipt this Period

500.00

☒

Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Green, Charlene, , ,

B.

Mailing Address 4 Sail View Cv

City

Greensboro

State

NC

Zip Code

27455-3449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Acnc

Physician

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2019			

Transaction ID : VVC3HQ94JA4

Amount of Each Receipt this Period

500.00

☐

Memo Item

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ActBlue

C.

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

3042652.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2019			

Transaction ID : VVC3HQ94JA4E

Amount of Each Receipt this Period

500.00

☒

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

500.00