

# **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)

**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 ▼

6130699.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 03 2020

Transaction ID : VVC3HQQG4A8E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

**Harper, Beth, , ,**

**B.**

Mailing Address 19 W Dale Ave  
Unit 202

City

Flagstaff

State

AZ

Zip Code

86001-4571

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Clinical Performance Partners Inc

Clinical Research Consultant

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2020

Transaction ID : VVC3HQQG4VB5

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 ▼

6130699.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 03 2020

Transaction ID : VVC3HQQG4VB5E

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