

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 OF 4118

(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

EMILY's List

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

A. Mathews, James, C., ,

Mailing Address 420 Voelker Drive

City

San Mateo

State

CA

Zip Code

94403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

REQUESTED

Occupation (for Individual)

REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

| | | | | |
|-------|---|-------|---|---------------|
| M M M | / | D D D | / | Y Y Y Y Y Y Y |
| 07 | | 21 | | 2019 |

Transaction ID : 6106537

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. Mathews, James, C., ,

Mailing Address 420 Voelker Drive

City

San Mateo

State

CA

Zip Code

94403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

REQUESTED

Occupation (for Individual)

REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

| | | | | |
|-------|---|-------|---|---------------|
| M M M | / | D D D | / | Y Y Y Y Y Y Y |
| 07 | | 28 | | 2019 |

Transaction ID : 6115873

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Morrisette, Barbara, , Ms.,

Mailing Address 6197 Contra Costa Road

City

Oakland

State

CA

Zip Code

94618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

REQUESTED

Occupation (for Individual)

REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

705.00

Date of Receipt

| | | | | |
|-------|---|-------|---|---------------|
| M M M | / | D D D | / | Y Y Y Y Y Y Y |
| 07 | | 13 | | 2019 |

Transaction ID : 6100494

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

100.00

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