

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Forward Majority Action PAC

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

A. Smith, Amy, , ,

Mailing Address 838 W End Ave
Apt 5B

City
New York

State
NY

Zip Code
10025-5365

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Village Institute For Psychotherapy

Occupation (for Individual)
Psychotherapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2018

Transaction ID : VTE9JQGGEJ3

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Smith, Daniel, , ,

Mailing Address 678 Ardis Ave

City
San Jose

State
CA

Zip Code
95117-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kaazing Corporation

Occupation (for Individual)
Senior Software Support Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : VTE9JQAQES0

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Soni, Anjili, , ,

Mailing Address 20576 Wild Meadow Ct

City
Ashburn

State
VA

Zip Code
20147-7448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cisco Systems Inc.

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2018

Transaction ID : VTE9JQAVAW5

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

300.00

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