

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)

Maggie Toulouse Oliver for Senate

A. Full Name (Last, First, Middle Initial) Kloke, Daniel, H., ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 24 / 2019	
Mailing Address 3804 Copper Ave NE Apt 1			Transaction ID : VN910KYDWB0	
City Albuquerque	State NM	Zip Code 87108-1049	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Kloke Development LLC		Occupation Consultant	* Earmarked Contribution: See Below	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 400.00		
B. Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2019	
Mailing Address PO Box 441146			Transaction ID : VN910KYDWB0E	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C C00401224			<input checked="" type="checkbox"/> Memo Item	
Name of Employer Conduit total listed in Agg. field		Election Cycle-to-Date ▼ _____ 159491.00		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Note: Above Contribution earmarked through this organization.		
C. Full Name (Last, First, Middle Initial) Kloke, Daniel, H., ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 26 / 2019	
Mailing Address 3804 Copper Ave NE Apt 1			Transaction ID : VN910KYE1X4	
City Albuquerque	State NM	Zip Code 87108-1049	Amount of Each Receipt this Period _____ 25.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Kloke Development LLC		Occupation Consultant	* Earmarked Contribution: See Below	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 400.00		
SUBTOTAL of Receipts This Page (optional).....			_____ 125.00	
TOTAL This Period (last page this line number only).....			_____	