

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

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

FOR LINE NUMBER: PAGE 11000 OF 15831

(check only one)

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

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NAME OF COMMITTEE (In Full)

MoveOn.org Political Action

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

A. Reedy, Mark, , ,

Mailing Address 984 Belmont Ter
Unit 3

City
Sunnyvale

State
CA

Zip Code
94086-4891

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Santa Clara Unified School District

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2019

Transaction ID : 2208540

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Reedy, Mark, , ,

Mailing Address 984 Belmont Ter
Unit 3

City
Sunnyvale

State
CA

Zip Code
94086-4891

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Santa Clara Unified School District

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 29 / 2019

Transaction ID : 2102069

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Reedy, Mark, , ,

Mailing Address 984 Belmont Ter
Unit 3

City
Sunnyvale

State
CA

Zip Code
94086-4891

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Santa Clara Unified School District

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2019

Transaction ID : 2007897

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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