

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)
LEE, SHEILA JACKSON

A. Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2019		
Mailing Address P.O. Box 382110			Transaction ID : SA11AI.28137.0		
City Cambridge	State MA	Zip Code 02238	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 136175.57			
Name of Employer Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation <input checked="" type="checkbox"/> Memo Item Donation			
B. Full Name (Last, First, Middle Initial) Ali, Mansoor, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 28 / 2019		
Mailing Address 6503 Wax Mallow			Transaction ID : SA11AI.28331		
City Houston	State TX	Zip Code 77095	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2700.00			
Name of Employer Global Marine Safety Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Sales Administrator <input type="checkbox"/> Memo Item donation			
C. Full Name (Last, First, Middle Initial) Ali, Rao, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 18 / 2019		
Mailing Address 520 Old Mill Road			Transaction ID : SA11AI.28147		
City Mansfield	State OH	Zip Code 44906	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 500.00			
Name of Employer Self Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Physician <input type="checkbox"/> Memo Item Donation			
SUBTOTAL of Receipts This Page (optional).....			3200.00		
TOTAL This Period (last page this line number only).....					