

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

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

FOR LINE NUMBER: PAGE 887 OF 4958

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EMILY's List

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

A. Dean, Jane, , Ms.,

Mailing Address 450 Center Street #12

City
Southport

State
NY

Zip Code
06890

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2019

Transaction ID : 6039930

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Gaarder, Patricia, , Ms.,

Mailing Address 1516 Pascal Street N

City
St Paul

State
MN

Zip Code
55108

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2019

Transaction ID : 6040020

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Golinsky, Susan, , ,

Mailing Address 7801 SW 47th Ave

City
Coral Gables

State
FL

Zip Code
33143

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2019

Transaction ID : 6039822

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

700.00