

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

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

FOR LINE NUMBER: PAGE 18 OF 29

(check only one)

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

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NAME OF COMMITTEE (In Full)

EDF Renewables Inc. PAC

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

A. O'Hair, Kathryn, L, ,

Mailing Address 15445 Innovation Drive

City
San Diego

State
CA

Zip Code
92128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDF Renewables Services Inc.

Occupation (for Individual)
Regional Development Director

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 / 15 / 2020

Transaction ID : A2020-1122170

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. O'Hair, Kathryn, L, ,

Mailing Address 15445 Innovation Drive

City
San Diego

State
CA

Zip Code
92128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDF Renewables Services Inc.

Occupation (for Individual)
Regional Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2020

Transaction ID : A2020-1122633

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Perry, Todd, A, ,

Mailing Address 15445 Innovation Drive

City
San Diego

State
CA

Zip Code
92128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDF Renewables Services Inc.

Occupation (for Individual)
Director of Quantitative Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2020

Transaction ID : A2020-820457

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

100.00

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