

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)
Schiff for Congress

A. Full Name (Last, First, Middle Initial) ActBlue			Date of Receipt M M / D D / Y Y Y Y Y 02 / 11 / 2019	
Mailing Address PO Box 382110			Transaction ID : VTE7CWHB7T3E	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Conduit total listed in Agg. field		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1213097.44		
B. Full Name (Last, First, Middle Initial) Dougherty, Linda, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 18 / 2019	
Mailing Address 1272 Washington St Unit C			Transaction ID : VTE7CWJ1R62	
City Weymouth	State MA	Zip Code 02189-2348	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Meals On Wheels Driver		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 222.50		
C. Full Name (Last, First, Middle Initial) ActBlue			Date of Receipt M M / D D / Y Y Y Y Y 02 / 25 / 2019	
Mailing Address PO Box 382110			Transaction ID : VTE7CWJ1R62E	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Conduit total listed in Agg. field		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1213097.44		
SUBTOTAL of Receipts This Page (optional)..... ▶			5.00	
TOTAL This Period (last page this line number only)..... ▶				