

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

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

FOR LINE NUMBER: PAGE 682 OF 1059

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Fair Fight**

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

**A. Brown, Christine, , ,**

Mailing Address 57 Grist Mill Rd

City  
Littleton

State  
MA

Zip Code  
01460-2250

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2020

**Transaction ID : VR060VBZT51**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Brugger, Adalyn, S., ,**

Mailing Address 1973 Retreat Dr

City

Mechanicsville

State

VA

Zip Code

23111-6021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Robert Parkerson Law Offices

Occupation (for Individual)  
Lawyer

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  
03 / 25 / 2020

**Transaction ID : VR060VD3HK6**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. Brumfield, Thomas, , ,**

Mailing Address PO Box 11303

City

Oakland

State

CA

Zip Code

94611-0303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

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  
02 / 18 / 2020

**Transaction ID : VR060V47PC0**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

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

1000.00