

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

Full Name (Last, First, Middle Initial)

ACTBLUE**A.**

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2018

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

708233.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	8

Transaction ID : VNVWKG5XN0E

Amount of Each Receipt this Period

10.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Fox, Richard, , ,**B.**

Mailing Address 1024 Pennsylvania Ave

City

Harrisburg

State

PA

Zip Code

17111-3017

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Westfield Insurance

Insurance Underwriter

Receipt For: 2018

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	8

Transaction ID : VNVWKGJ3N0

Amount of Each Receipt this Period

150.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE**C.**

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2018

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

708233.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	8

Transaction ID : VNVWKGJ3N0E

Amount of Each Receipt this Period

150.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

150.00

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