

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

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

FOR LINE NUMBER: PAGE 91 OF 223  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Indivisible Action**

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

**A. Baird, Melanie, , ,**

Mailing Address 638 Pine Point Dr

City  
Akron

State  
OH

Zip Code  
44333

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2019

**Transaction ID : SA17.129932**

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. Barlow, Harriet, , ,**

Mailing Address PO Box 265

City

Point Reyes Station

State

CA

Zip Code

94956

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

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  
11 / 26 / 2019

**Transaction ID : SA17.123098**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Non-Contribution Account

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

**C. Barringer, Wayne, , ,**

Mailing Address 1926 242nd St. SE

City

Bothell

State

WA

Zip Code

98021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Boeing

Occupation (for Individual)  
Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

661.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2019

**Transaction ID : SA17.132600**

Amount of Each Receipt this Period

51.00

☐ Memo Item  
Non-Contribution Account

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

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

326.00