

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

PAGE 86 OF 268

<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)

Friends of Jahana Hayes

Full Name (Last, First, Middle Initial)

A. Johnson, Keith, , ,

Mailing Address PO Box 1188

City

Sharon

State

CT

Zip Code

06069-1188

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For: 2020

☐ Primary☐ General☒ Other (specify) ▼

Convention

Election Cycle-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	9

Transaction ID : 1461430

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2020

☐ Primary☐ General☒ Other (specify) ▼

Convention

Election Cycle-to-Date ▼

174845.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	9

Transaction ID : 1461430E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

C. Jones, Cathy, , ,

Mailing Address 6629 Rex Rd

City

Holly Springs

State

NC

Zip Code

27540-8811

FEC ID number of contributing
federal political committee.

C

Name of Employer

Law Office Of Bryan Brice Jr.

Occupation

Senior Litigation Associate

Receipt For: 2020

☐ Primary☐ General☒ Other (specify) ▼

Convention

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	9

Transaction ID : 1496135

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

600.00

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