

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)

PAGE 8869 OF 10051

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Tammy Baldwin for Senate

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 390728

City

Cambridge

State

MA

Zip Code

02139-0008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1686463.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 29 2018

Transaction ID : VSHFBFXRFC3E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Walker, Diane, , ,

B.

Mailing Address 1 N Hill Rd

City

Wausau

State

WI

Zip Code

54403-3672

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

RN

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

195.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 11 2018

Transaction ID : VSHFBFVDFX7

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Walker, Diane, , ,

C.

Mailing Address 1 N Hill Rd

City

Wausau

State

WI

Zip Code

54403-3672

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

RN

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 11 2018

Transaction ID : VSHFBFYTXK7

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

30.00

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