

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)

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

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NAME OF COMMITTEE (In Full)

Dr Kim Schrier for Congress

A. Full Name (Last, First, Middle Initial) Marquardt, Kent, S, ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2019	
Mailing Address 73 Shangri La Ct			Transaction ID : VTR5FHSCXS6	
City Walla Walla	State WA	Zip Code 99362-4558	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer None		Occupation Retired		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1000.00		
B. Full Name (Last, First, Middle Initial) Martin, Lyle, C, ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 10 / 2019	
Mailing Address 15542 8th Ave NE			Transaction ID : VTR5FHSVFF4	
City Shoreline	State WA	Zip Code 98155-6239	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer None		Occupation Retired		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) Martin, Lyle, C, ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2019	
Mailing Address 15542 8th Ave NE			Transaction ID : VTR5FHT3J13	
City Shoreline	State WA	Zip Code 98155-6239	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer None		Occupation Retired		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 750.00		
SUBTOTAL of Receipts This Page (optional).....			1750.00	
TOTAL This Period (last page this line number only).....				