

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)

Committee To Elect Tedra Cobb

Full Name (Last, First, Middle Initial)

A.**Sawyer, John, , ,**

Mailing Address 47 Harrison Ave

City

Glens Falls

State

NY

Zip Code

12801-2733

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hudson Headwaters Health Net

Occupation

Physician

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	0

Transaction ID : 6507123

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) ▼

Election Cycle-to-Date ▼

280927.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	0

Transaction ID : 6507123E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

C.**Scagnelli, Paul, , ,**

Mailing Address 18514 US Highway 19 N

City

Clearwater

State

FL

Zip Code

33764-2764

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Self Employed

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	0

Transaction ID : 6548410

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

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

600.00

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