

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

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

FOR LINE NUMBER: PAGE 800 OF 1036

(check only one)

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

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NAME OF COMMITTEE (In Full)

Equality PAC

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

A. Smith, Thomas, , ,

Mailing Address 1061 W 400 N

City

West Bountiful

State

UT

Zip Code

84087-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 11 / 2018

Transaction ID : VSH0PG4H9H5

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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 (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

131007.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 17 / 2018

Transaction ID : VSH0PG4H9H5E

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Smith, Thomas, , ,

Mailing Address 1061 W 400 N

City

West Bountiful

State

UT

Zip Code

84087-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2018

Transaction ID : VSH0PG4HRB1

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

10.00

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