

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Lucy McBath

A. Full Name (Last, First, Middle Initial) Emily's List			Date of Receipt M M / D D / Y Y Y Y 01 / 30 / 2020		
Mailing Address 1800 M St NW Ste 375N			Transaction ID : VVBPDSF4K6E		
City Washington	State DC	Zip Code 20036-5862	Amount of Each Receipt this Period _____ 2800.00		
FEC ID number of contributing federal political committee. C		Note: Above Contribution earmarked through this organization.			
Name of Employer Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Conduit total listed in Agg. field Election Cycle-to-Date ▼ _____ 10636.36			
B. Full Name (Last, First, Middle Initial) Cogen, Doug, , ,			Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2020		
Mailing Address 127 2Nd Ave			Transaction ID : VVBPD3YQM2		
City San Francisco	State CA	Zip Code 94118-1414	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C		Memo Item			
Name of Employer Fenwick & West LLP Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Attorney Election Cycle-to-Date ▼ _____ 250.00			
C. Full Name (Last, First, Middle Initial) ActBlue			Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2020		
Mailing Address 366 Summer St			Transaction ID : VVBPD3YQM2E		
City Somerville	State MA	Zip Code 02144-3132	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C		Memo Item			
Name of Employer Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Conduit total listed in Agg. field Election Cycle-to-Date ▼ _____ 618732.97			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 250.00		
TOTAL This Period (last page this line number only)..... ▶			_____		