

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

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

FOR LINE NUMBER: PAGE 13714 OF 1434060

(check only one)

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

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)

ActBlue

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

A. LAMEL, JOSHUA, , ,

Mailing Address 5510 TRENT ST

City
CHEVY CHASE

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BGR GROUP

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 15 / 2018

Transaction ID : SA11AI_113546243

Amount of Each Receipt this Period

250.00

☐ Memo Item
Earmark

Earmarked for XOCHITL FOR NEW MEXICO
(C00666149)

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

B. LAMEL, JOSHUA, , ,

Mailing Address 5510 TRENT ST

City
CHEVY CHASE

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BGR GROUP

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 15 / 2018

Transaction ID : SA11AI_113546065

Amount of Each Receipt this Period

250.00

☐ Memo Item
Earmark

Earmarked for ELAINE FOR CONGRESS (C00664375)

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

C. LAMENDOLA, CINDY, , ,

Mailing Address 440 SANTA MONICA AVE

City
MENLO PARK

State
CA

Zip Code
94025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY SETTING

Occupation (for Individual)
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

90.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2018

Transaction ID : SA11AI_113285567

Amount of Each Receipt this Period

15.00

☐ Memo Item
Earmark

Earmarked for FRIENDS OF CHERI BUSTOS
(C00498568)

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

515.00

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