

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1393 OF 1473188

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

ActBlue

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

A. IZVERNARI, MARTHA, , ,

Mailing Address 1695 SO SAN JACINTO AVE STE L

City
SAN JACINTOState
CAZip Code
92583FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAMONA FAMILY MEDICAL OFFICEOccupation (for Individual)
NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2017

Transaction ID : SA11AI_80090239

Amount of Each Receipt this Period

5.00

☐ Memo Item
 Earmark

Earmarked for ELIZABETH FOR MA, INC. (C00500843)

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

B. IZZARD, EDDIE, , ,

Mailing Address 1801 CENTURY PARK EAST SUITE 1250

City
LOS ANGELESState
CAZip Code
90067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2017

Transaction ID : SA11AI_82656822

Amount of Each Receipt this Period

100.00

☐ Memo Item
 Earmark

Earmarked for DCCC (C00000935)

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

C. IZZARD, EDDIE, , ,

Mailing Address 1801 CENTURY PARK EAST SUITE 1250

City
LOS ANGELESState
CAZip Code
90067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2017

Transaction ID : SA11AI_82656823

Amount of Each Receipt this Period

10.00

☐ Memo Item
 Contribution to Act Blue

Contribution to ActBlue

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

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

115.00