

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A. Full Name (Last, First, Middle Initial) ActBlue			Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2020		
Mailing Address PO Box 382110			Transaction ID : VR0CZVJA232E		
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C C00401224		Name of Employer Occupation Conduit total listed in Agg. field			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 81369.94			
B. Full Name (Last, First, Middle Initial) Rand, Colleen, , ,			Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2020		
Mailing Address 2220 NW 3Rd Pl			Transaction ID : VR0CZVJ6842		
City Gainesville	State FL	Zip Code 32603-1406	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Not Employed Retired			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 800.00			
C. Full Name (Last, First, Middle Initial) Pizer, Marilyn, C., ,			Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2020		
Mailing Address 115 Stateside Dr			Transaction ID : VR0CZVJCK42		
City Chapel Hill	State NC	Zip Code 27514-6631	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Not Employed Retired			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 700.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 150.00		
TOTAL This Period (last page this line number only)..... ▶			_____		