

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)
Katie Hill for Congress

A. Full Name (Last, First, Middle Initial) ActBlue			Date of Receipt M M / D D / Y Y Y Y Y 08 / 18 / 2019		
Mailing Address PO Box 441146			Transaction ID : VTEEXC96T0E		
City West Somerville	State MA	Zip Code 02144-0031	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 ▼ _____ 251051.97			
B. Full Name (Last, First, Middle Initial) Zolla, Susan, , ,			Date of Receipt M M / D D / Y Y Y Y Y 09 / 16 / 2019		
Mailing Address 2525 Ocean Park Blvd Ste 216			Transaction ID : VTEEXKWSV0		
City Santa Monica	State CA	Zip Code 90405-5286	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. C		Name of Employer Occupation Horizon Construction & Property Manage Owner			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 300.00			
C. Full Name (Last, First, Middle Initial) ActBlue			Date of Receipt M M / D D / Y Y Y Y Y 09 / 22 / 2019		
Mailing Address PO Box 441146			Transaction ID : VTEEXKWSV0E		
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period _____ 300.00		
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 ▼ _____ 251051.97			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 300.00		
TOTAL This Period (last page this line number only)..... ▶			_____		