

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

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

FOR LINE NUMBER: PAGE 2785 OF 5354

(check only one)

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

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NAME OF COMMITTEE (In Full)

Equality PAC

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

A. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

747561.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2019

Transaction ID : VSH0PJ5NMH6E

Amount of Each Receipt this Period

3.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

B. Karlsen, Ann, , ,

Mailing Address PO Box 10

City

Peaks Island

State

ME

Zip Code

04108-0010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

732.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 06 / 2019

Transaction ID : VSH0PJ5NMJ4

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution: See Below

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

C. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

747561.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2019

Transaction ID : VSH0PJ5NMJ4E

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

5.00