

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Human Rights Campaign Equality Votes PAC

A. Disney, Sheri, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3500 W Olive Ave
 City Burbank State CA Zip Code 91505-4628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Disney Family Foundation Occupation (for Individual) Non-Profit Mgmnt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 24 / 2020
Transaction ID : VVBMQR4QWA5
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Doonan, Patrick, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 Nieto Ave
 City Long Beach State CA Zip Code 90803-3356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IBM Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2020
Transaction ID : VVBMQR4QX82
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Dusek, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3026 Fairmount Blvd
 City Cleveland State OH Zip Code 44118-4129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lubrizol Occupation (for Individual) Travel Coordinator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2020
Transaction ID : VVBMQR4QZV5
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	