

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1454 OF 2863

(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)

House Majority PAC

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

**A. Eisenberg, Bruce, , ,**

Mailing Address 1450 Starling Ln

City  
Cherry HillState  
NJZip Code  
08003-2719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Blank Rome LLP

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1596.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2020

Transaction ID : VN8FNN3FQ46

Amount of Each Receipt this Period

35.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**B. ACTBLUE**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110FEC 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 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491148.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2020

Transaction ID : VN8FNN3FQ46E

Amount of Each Receipt this Period

35.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Andersen, Marsha, , ,**

Mailing Address 8302 Kingsdale Dr

City  
Huntington BeachState  
CAZip Code  
92646-3829FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

VECTOR Inc.

Occupation (for Individual)

Vocational Evaluator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2020

Transaction ID : VN8FNN3GE46

Amount of Each Receipt this Period

15.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

50.00

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