

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)
Ehr for Congress

A. Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y Y 08 / 25 / 2019	
Mailing Address PO Box 441146			Transaction ID : CDABR-00000000058454	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C C00401224		Name of Employer Occupation		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 0.00		
B. Full Name (Last, First, Middle Initial) Dimick, Robert, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 31 / 2019	
Mailing Address 4581 SOUNDSIDE DR			Transaction ID : CDR-0000000000059831	
City GULF BREEZE	State FL	Zip Code 32563-	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation SRMG PHYSICIAN		
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2900.00		
C. Full Name (Last, First, Middle Initial) ACTBLUE			Date of Receipt M M / D D / Y Y Y Y Y 08 / 31 / 2019	
Mailing Address PO Box 441146			Transaction ID : CDABR-00000000059831	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C C00401224		Name of Employer Occupation		
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 0.00		
SUBTOTAL of Receipts This Page (optional).....			100.00	
TOTAL This Period (last page this line number only).....				