SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 60
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE - FED FUND

A.
Full Name (Last, First, Middle Initial): JOHN OBRIEN
Mailing Address: 25 ANDOVER ST 3
City: WORCESTER State: MA Zip Code: 01606
FEC ID number of contributing federal political committee: C
Name of Employer: UMass Memorial Healthcare
Occupation: Exec
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 19 2004
Transaction ID: SA11A1.34904
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): MICHAEL ONEILL
Mailing Address: 184 BELLEVUE ST
City: BOSTON State: MA Zip Code: 02132-2637
FEC ID number of contributing federal political committee: C
Name of Employer: requested
Occupation: best effort made
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 20 2004
Transaction ID: SA11A1.34910
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): VINCENT PASSANANTI
Mailing Address: 10 DORRANCE STREET 524
City: PROVIDENCE State: RI Zip Code: 02903
FEC ID number of contributing federal political committee: C
Name of Employer: Meridian Benefits Corp
Occupation: President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 20 2004
Transaction ID: SA11A1.34914
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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