

**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 2598 OF 22820
	<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)  
**DCCC**

**A. JOE C' DE BACA**  
Full Name (Last, First, Middle Initial)  
Mailing Address 119 CALLE CROWN  
City AGUADILLA State PR Zip Code 00603-1113  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation UNEMPLOYED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 256.63

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015  
**Transaction ID : VT4C3PM0F79**  
Amount of Each Receipt this Period  
20.00  
**\* EARMARKED CONTRIBUTION: SEE BELOW EARMARKED THROUGH ACTBLUE**

**B. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 382110  
City CAMBRIDGE State MA Zip Code 02238-2110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation CONDUIT TOTAL LISTED IN AGG. FIELD  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1650373.80

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015  
**Transaction ID : VT4C3PM0F79E**  
Amount of Each Receipt this Period  
20.00  
**[MEMO ITEM]**  
NOTE: ABOVE CONTRIBUTION EARMARKED THROUGH THIS ORGANIZATION.

**C. CHRISTINE CABELL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7680 TREMAYNE PL APT 304  
City MC LEAN State VA Zip Code 22102-7682  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2015  
**Transaction ID : VT4C3PJY895**  
Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00  
**TOTAL** This Period (last page this line number only)..... ▶