

**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 9292 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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**DCCC**

**A. WILLIAM S. JAMIESON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 15 MACON AVE  
City ASHEVILLE State NC Zip Code 28801-1522  
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 ▼ 750.00

Date of Receipt 09 / 27 / 2015  
Transaction ID : VT4C3PK5WS6  
Amount of Each Receipt this Period 250.00  
\* 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 Occupation CONDUIT TOTAL LISTED IN AGG. FIELD  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1650373.80

Date of Receipt 09 / 27 / 2015  
Transaction ID : VT4C3PK5WS6E  
Amount of Each Receipt this Period 250.00  
[MEMO ITEM]  
NOTE: ABOVE CONTRIBUTION EARMARKED THROUGH THIS ORGANIZATION.

**C. ARDELLE JAMISON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1245 MAYFLOWER AVE  
City MELBOURNE State FL Zip Code 32940-6725  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2015  
Transaction ID : VT4C3PMX714  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**TOTAL** This Period (last page this line number only)..... ▶