

**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 4089 OF 193526
	<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)
ActBlue

A. ELIZABETH BAKKEN
Full Name (Last, First, Middle Initial)
Mailing Address 23 OLD LYME RD.
City PITTSFORD State NY Zip Code 14534
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation CAREER CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 30.00

Date of Receipt 02 / 03 / 2015
Transaction ID : SA11AI_25247271
Amount of Each Receipt this Period 5.00
Earmark
Earmarked for DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (C00000935)

B. MARK BAKKEN
Full Name (Last, First, Middle Initial)
Mailing Address 2112 WAUNONA WAY
City MADISON State WI Zip Code 53713
FEC ID number of contributing federal political committee. **C**
Name of Employer NORDIC CONSULTING Occupation HEALTHCARE CONSULTING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 950.00

Date of Receipt 02 / 02 / 2015
Transaction ID : SA11AI_25237523
Amount of Each Receipt this Period 250.00
Earmark
Earmarked for DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (C00000935)

C. MARK BAKKEN
Full Name (Last, First, Middle Initial)
Mailing Address 2112 WAUNONA WAY
City MADISON State WI Zip Code 53713
FEC ID number of contributing federal political committee. **C**
Name of Employer NORDIC CONSULTING Occupation HEALTHCARE CONSULTING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 950.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA11AI_25460509
Amount of Each Receipt this Period 100.00
Earmark
Earmarked for DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE (C00000935)

SUBTOTAL of Receipts This Page (optional)..... ▶ 355.00
TOTAL This Period (last page this line number only)..... ▶