

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 42730 OF 1016429

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLACK, PERRY, , ,

Mailing Address 22 SUMMIT STREET

City
PHILADELPHIA

State
PA

Zip Code
19118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DREXEL UNIV. COLLEGE OF MEDICINE

Occupation (for Individual)
NEUROSURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2017

Transaction ID : SA11AI_76741377

Amount of Each Receipt this Period

100.00

☐ Memo Item
Earmark

Earmarked for DCCC (C00000935)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BLACK, PERRY, , ,

Mailing Address 22 SUMMIT STREET

City
PHILADELPHIA

State
PA

Zip Code
19118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DREXEL UNIV. COLLEGE OF MEDICINE

Occupation (for Individual)
NEUROSURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2017

Transaction ID : SA11AI_76730416

Amount of Each Receipt this Period

50.00

☐ Memo Item
Earmark

Earmarked for NATIONAL DEMOCRATIC TRAINING COMMITTEE PAC ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLACK, PERRY, , ,

Mailing Address 22 SUMMIT STREET

City
PHILADELPHIA

State
PA

Zip Code
19118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DREXEL UNIV. COLLEGE OF MEDICINE

Occupation (for Individual)
NEUROSURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2017

Transaction ID : SA11AI_76730415

Amount of Each Receipt this Period

50.00

☐ Memo Item
Earmark

Earmarked for ROB QUIST FOR MONTANA (C00632232)

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

200.00

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