

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2277 OF 1016429

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)

ActBlue

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

**A. DEVLIN, ROSEMARY, , ,**

Mailing Address 18 DAWN CRESCENT

City  
CENTRAL ISLIPState  
NYZip Code  
11722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2017

Transaction ID : SA11AI\_78293034

Amount of Each Receipt this Period

8.00

☐ Memo Item  
 Earmark

Earmarked for DSCC (C00042366)

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

**B. DEVLIN, ROSEMARY, , ,**

Mailing Address 18 DAWN CRESCENT

City  
CENTRAL ISLIPState  
NYZip Code  
11722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : SA11AI\_78536344

Amount of Each Receipt this Period

2.50

☐ Memo Item  
 Contribution to Act Blue

Contribution to ActBlue

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

**C. DEVLIN, ROSEMARY, , ,**

Mailing Address 18 DAWN CRESCENT

City  
CENTRAL ISLIPState  
NYZip Code  
11722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

Transaction ID : SA11AI\_78536332

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 Earmark

Earmarked for DSCC (C00042366)

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

35.50

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