

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 192 OF 2849

(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Action

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

A. Barry, Robert, , ,

Mailing Address 17 Pulsifer St

City  
NewtonState  
MAZip Code  
02460-2220FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 26 / 2020

Transaction ID : VN8EQN339X3

Amount of Each Receipt this Period

5.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

B. ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1728743.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2020

Transaction ID : VN8EQN339X3E

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Barry, Robert, , ,

Mailing Address 17 Pulsifer St

City

Newton

State

MA

Zip Code

02460-2220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

313.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2020

Transaction ID : VN8EQN34CW8

Amount of Each Receipt this Period

1.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

6.00

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