

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

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

FOR LINE NUMBER: PAGE 4774 OF 7397

(check only one)

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

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NAME OF COMMITTEE (In Full)

**DNC Services Corp./Dem. Nat'l Committee**

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

**A. Resnik, David, , ,**

Mailing Address 8932 Ashcroft Ave

City

West Hollywood

State

CA

Zip Code

90048-2404

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Lunatica Productions

Occupation (for Individual)

Independent Producer

Receipt For: 2020

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 29 / 2020

Transaction ID : 34895256

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**B. Actblue**

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For: 2020

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

3651186.94

Date of Receipt

03 / 27 / 2020

Transaction ID : 34895256E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Retherford, Franklin, B, ,**

Mailing Address 602 SW 175th Pl

City

Normandy Park

State

WA

Zip Code

98166-3666

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Physician

Receipt For: 2020

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 16 / 2020

Transaction ID : 34833642

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

500.00